Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 1 of 69

| Fill in this information to identify your case: |                               |
|---|-------------------------------|
| United States Bankruptcy Court for the:         |                               |
| Northern District of: Illinois (State)          |                               |
| Case number (if known)                          | Chapter you are filing under: |
|   | Chapter 7 Chapter 11          |
|   | Chapter 12 Chapter 13         |

### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pá | art 1: Identify Yourself  |                            |  |
|----|---|----------------------------|--|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case):  |
| 1. | Your full name  | Sterling                   |  |
|    | Write the name that is on   | First name                 | First name   |
|    | your government-issued picture identification (for                  | Middle name                | Middle name  |
|    | example, your driver's  | Martin                     |  |
|    | license or passport   | Last name                  | Last name  |
|    | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)   |
| 2. | All other names you   |                            |  |
|    | have used in the last   | First name                 | First name   |
|    | 8 years   |                            |  |
|    | Include your married or   | Middle name                | Middle name  |
|    | maiden names.   |                            |  |
|    |   | Last name                  | Last name  |
|    |   | First name                 | First name   |
|    |   | i iist iidile              | i iist iidirie   |
|    |   | Middle name                | Middle name  |
|    |   |                            | The state of the s |
|    |   | Last name                  | Last name  |
| 3. | Only the last 4 digits of your Social                               | XXX - XX- <u>3636</u>      | xxx - xx-  |
|    | Security number or federal Individual                               | OR                         | OR   |
|    | Taxpayer Identification number (ITIN)                               | 9 xx - xx-                 | 9 xx - xx-   |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 2 of 69

| Debtor 1 Sterling<br>First Name                              | Martin<br>Middle Name Last Name  | Case number (if known)   |
|--|--|--|
|  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):                      |
| 4. Any business names and Employer                           | I have not used any business names or EINs.  | I have not used any business names or EINs.                        |
| Identification<br>Numbers (EIN) you<br>have used in the last | Business name  | Business name  |
| 8 years Include trade names and                              | Business name  | Business name  |
| doing business as names                                      | EIN  | EIN  |
|  | EIN  | EIN  |
| 5. Where you live  |  | If Debtor 2 lives at a different address:                          |
|  | 7409 Woodward Ave<br>Number Street<br>Apt 109  | Number Street  |
|  | Woodridge Illinois 60517 City State Zip Code   | e City State Zip Code  |
|  | Du Page<br>County  | County   |
|  | If your mailing address is different from the above, fill it in here. Note that the court will senotices to you at this mailing address. | one If Debtor 2's mailing address is different from yours,         |
|  | Number Street  | Number Street  |
|  | City State Zip Co  | ode City State Zip Code  |
| 6. Why you are choosing this district                        | Check one:   | Check one:   |
| to file for bankruptcy                                       | Over the last 180 days before filing this petitic lived in this district longer than in any other di                                     |  |
|  | I have another reason. Explain. (See 28 U.S.C  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)           |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| choosing this district                                       | Over the last 180 days before filing this petitic lived in this district longer than in any other di                                     | Over the last 180 days before filing this petition, I have strict. |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 3 of 69

| Debtor 1 Sterling   |  | Martin   |   | Case number (if kno  | wn)  |  |
|---|--|--|---|--|--|--|
| First Name  | Middle Name  | Last Name  |   |  |  |  |
| Part 2: Tell the Court Abo  | out Your Bankruptc   | y Case   |   |  |  |  |
| <ol> <li>The chapter of the<br/>Bankruptcy Code you<br/>are choosing to file<br/>under</li> </ol>   |  | rief description of each, see<br>2010)). Also, go to the top o   |   |  |  | ndividuals Filing for  |
| 8. How you will pay the fee   | more details ab cashier's check may pay with a  I need to pay the landividuals to F  I request that rejudge may, but the official pove you choose this | out how you may pay. Ty, or money order. If your credit card or check with the fee in installments. If Pay Your Filing Fee in Installments on the fee be waived (You ris not required to, waive erty line that applies to your   | ypically, if you attorney is so a pre-printed from the stallments (Omay request your fee, an our family signs the Application | ou are paying the<br>submitting your<br>ed address.<br>e this option, sig<br>official Form 103<br>this option only<br>d may do so on<br>ze and you are u | e fee yourself, payment on your and attach to A).  If you are filingly if your incorunable to pay to | our behalf, your attorney the Application for the for Chapter 7. By law, a |
| 9. Have you filed for<br>bankruptcy within the<br>last 8 years?   | No.  ✓ Yes. District  District  District   | Northern District of Illinois  | When<br>When<br>When  | 8/31/2012<br>MM / DD / YYYY<br>MM / DD / YYYY  | Case number _ Case number _ Case number _  | 12-34805   |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District District  |  | When<br>When  | MM / DD / YYYY   | Relationship to Case number, i Relationship to Case number, i  | you  |
| 11. Do you rent your residence?   | ✓ No. 6  | andlord obtained an eviction to line 12.  The statement About the statement of the statemen |   | -  | st You (Form 10  | 1A) and file it with   |

### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 4 of 69

Martin Debtor 1 Sterling \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 5 of 69

Debtor 1 Sterling Martin Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 6 of 69

| Debtor 1 Sterling  | Martin  |   | umber (if known)  |   |
|--|---|---|---|---|
| First Name   | Middle Name Last Na   | ame   |   |   |
| Part 6: Answer These Que   | estions for Reporting Purposes  | anna an dahta Canauman  | debte are defined in 11110  | C \$ 101(0) as  |
| 16. What kind of debts do you have?  | <ul> <li>16a. Are your debts primarily con "incurred by an individual prin No. Go to line 16b.</li> <li>✓ Yes. Go to line 17.</li> <li>16b. Are your debts primarily bus money for a business or inves No. Go to line 16c.</li> <li>✓ Yes. Go to line 17.</li> <li>16c. State the type of debts you over the state of the st</li></ul> | marily for a personal, family<br>siness debts? <i>Business de</i><br>stment or through the oper                                 | y, or household purpose."  Pots are debts that you incurration of the business or inve    | red to obtain   |
| 17. Are you filing under<br>Chapter 7?<br>Do you estimate that<br>after any exempt   | ✓ No. I am not filing under Chapter  Yes. I am filing under Chapter 7. Description of the expenses are paid that funds  | Do you estimate that after any  |   | and administrative  |
| property is excluded<br>and administrative<br>expenses are paid that<br>funds will be available<br>for distribution to<br>unsecured creditors? | □ No. □ Yes.  |   |   |   |
| 18. How many creditors do you estimate that you owe?   | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000  | ☐ 25,001-50<br>☐ 50,001-10<br>☐ More than   | 00,000  |
| 19. How much do you estimate your assets to be worth?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 mil \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$500   | million   | ,001-\$1 billion<br>10,001-\$10 billion<br>100,001-\$50 billion<br>\$50 billion |
| 20. How much do you<br>estimate your<br>liabilities to be?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 mil \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$500   | million   | 001-\$1 billion<br>0,001-\$10 billion<br>00,001-\$50 billion<br>\$50 billion    |
| Part 7: Sign Below   |   |   |   |   |
| For you  | I have examined this petition, and I correct.  If I have chosen to file under Chapte of title 11, United States Code. I un under Chapter 7.   | er 7, I am aware that I may<br>iderstand the relief availabl  | proceed, if eligible, under Cl<br>le under each chapter, and I                            | hapter 7, 11,12, or 13<br>choose to proceed                                     |
|  | If no attorney represents me and I dout this document, I have obtained I request relief in accordance with the I understand making a false stateme connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 1519   | and read the notice require the chapter of title 11, Unite ent, concealing property, ocan result in fines up to \$29, and 3571. | ed by 11 U.S.C. § 342(b).<br>ed States Code, specified in<br>or obtaining money or proper | this petition.<br>rty by fraud in   |
|  | /s/ Sterling Martin Signature of Debtor 1   | <b>x</b>  | Signature of Debtor 2   |   |
|  | Executed on 2/8/2018<br>MM / DD / YY  |   | Executed on   | YYYY  |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 7 of 69

| Debtor 1 Sterling                                |  | Martin  | Case number (if   | known)  |
|--|--|---|---|---|
| First Name                                       | Middle Name  | Last Name                                     |   |   |
| For your attorney, if you are represented by one | eligibility to proceed und relief available under each | der Chapter 7, 11, 12<br>ch chapter for which | 2, or 13 of title 11, United<br>the person is eligible. I a | nave informed the debtor(s) about<br>d States Code, and have explained the<br>also certify that I have delivered to the |
| If you are not                                   | . ,  |   |   | which § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | have no knowledge after                                | an inquiry that the                           | information in the sched                                    | lules filed with the petition is incorrect.   |
| attorney, you do not                             | <b>X</b>   |   |   |   |
| need to file this page.                          | /s/ James Nowak  |   | Date  | 2/8/2018<br>M / DD / YYYY   |
|  | Signature of Attorney f                                | or Debtor                                     | IVI   | IM / DD / ** * * * * * * * * * * * * * * *  |
|  |  |   |   |   |
|  |  |   |   |   |
|  | James Nowak  |   |   |   |
|  | Printed name   |   |   |   |
|  | Semrad Law Firm  |   |   |   |
|  | Firm name  |   |   |   |
|  | 1444 N. Farnsworth A                                   | venue   |   |   |
|  | Street   |   |   |   |
|  | Suite 300  |   |   |   |
|  |  |   |   |   |
|  | Aurora   |   | Illinois  | 60505   |
|  | City   |   | State   | Zip Code  |
|  |  |   |   |   |
|  | Contact phone  | 3122374982                                    | Email address   | jnowak@semradlaw.com  |
|  |  |   |   |   |
|  | 6324423  |   | Illinois  | <u> </u>  |
|  | Bar number   |   | State   |   |

### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 8 of 69

| Fill in this infor     | mation to identify your c | ase:        |                      |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1               | Sterling                  |             | Martin               |
|                        | First Name                | Middle Name | Last Name            |
| Debtor 2               |                           |             |                      |
| (Spouse, if filing)    | First Name                | Middle Name | Last Name            |
| United States E        | Bankruptcy Court for the: | Northern    | District of Illinois |
|                        |                           |             | (State)              |
| Case number (If known) |                           |             |                      |

| Check if this is an |
|---------------------|
| amended filing      |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|   | Your assets<br>Value of what you own      |
|---|---|
| I. Schedule A/B: Property (Official Form 106A/B)  | \$0.00                                    |
| 1a. Copy line 55, Total real estate, from Schedule A/B  | <u>·</u>                                  |
| 1b. Copy line 62, Total personal property, from Schedule A/B  | \$5,675.00                                |
| 1c. Copy line 63, Total of all property on Schedule A/B   | \$5,675.00                                |
| Part 2: Summarize Your Liabilities  |   |
|   | <b>Your liabilities</b><br>Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00                                    |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$7,200.00                                |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  | <del></del>                               |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$68,647.00                               |
| Your total liabilities  | \$75,847.00                               |
| Part 3: Summarize Your Income and Expenses  |   |
| 4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I   | \$1,836.81                                |
| · · · ·   |   |
| 5. Schedule J: Your Expenses (Official Form 106J)   |   |

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 9 of 69

| Deb         | tor 1          | Sterling  |                             | Martin  | Case number (if known)  |            |  |  |  |  |
|-------------|----------------|---|-----------------------------|---|---|------------|--|--|--|--|
| 5 .         |                | First Name  | Middle Name                 | Last Name   | ada.  |            |  |  |  |  |
| Part        | 4:             | Answer These Question   | ons for Administrativ       | ve and Statistical Recor  | ras   |            |  |  |  |  |
| 6. <b>A</b> | re yo          | ou filing for bankruptcy un   | der Chapters 7, 11, or      | 13?   |   |            |  |  |  |  |
| Г           |                | lo. You have nothing to repo  | ort on this part of the for | m. Check this box and subm  | it this form to the court with your other sch                         | redules.   |  |  |  |  |
| -<br>[-     | <b>→</b> ∨     | es.   |                             |   |   |            |  |  |  |  |
|             |                |   |                             |   |   |            |  |  |  |  |
| 7. W        |                | kind of debt do you have?   |                             |   |   |            |  |  |  |  |
| [           |                |   |                             | ner debts are those incurred t<br>Il out lines 8-10 for statistical | by an individual primarily for a personal, purposes. 28 U.S.C. § 159. |            |  |  |  |  |
| Г           | ¬ <sub>Y</sub> | our debts are not primaril  | y consumer debts. You       | u have nothing to report on the                                     | nis part of the form. Check this box and sul                          | bmit       |  |  |  |  |
|             |                | nis form to the court with yo   |                             |   | ·   |            |  |  |  |  |
| 8. I        | From           | n the Statement of Your C   | urrent Monthly Income       | : Copy your total current mor                                       | nthly income from Official  | \$2,613.56 |  |  |  |  |
|             |                | 122A-1 Line 11; <b>OR</b> , Form  |                             |   |   | 42,0.000   |  |  |  |  |
| 9.          | Con            | ov the following special ca   | togories of claims from     | m Part / line 6 of Schodule   | . E/E•  |            |  |  |  |  |
| 3.          |                | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:        |                             |   |   |            |  |  |  |  |
|             | Fro            | m Part 4 on Schedule E/F,   | copy the following:         |   | Total claim   |            |  |  |  |  |
|             | 9a.            | Domestic support obligation   | ıs (Copy line 6a.)          |   | \$0.00  |            |  |  |  |  |
|             | 9h             | Taxes and certain other deb   | ts you owe the governm      | nent (Conviline 6h.)  | \$7,200.00  |            |  |  |  |  |
|             |                |   | ,                           | , , ,   | \$0.00  |            |  |  |  |  |
|             | 9c.            | Claims for death or persona   | l injury while you were in  | toxicated. (Copy line 6c.)  | <u>·</u>  |            |  |  |  |  |
|             | 9d.            | Student loans. (Copy line 61  | ·.)                         |   | \$9,838.00  |            |  |  |  |  |
|             |                | 9e. Obligations arising out of a separation agreement or d priority claims. (Copy line 6g.) |                             | divorce that you did not repo                                       | ort as \$0.00   |            |  |  |  |  |
|             | μο             | , (556)5 09./   |                             |   | \$0.00  |            |  |  |  |  |
|             | 9f. I          | Debts to pension or profit-sh   | naring plans, and other s   | similar debts. (Copy line 6h.)                                      |   |            |  |  |  |  |

\$17,038.00

9g. Total. Add lines 9a through 9f.

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 10 of 69

| Fill in this                           | inform                    | nation to identify your c | ase:   |                      |   |   |   |   |
|--|---------------------------|---------------------------|--|----------------------|---|---|---|---|
| Debtor 1                               |                           | Ctorlin a                 |  |                      | Mortin  |   |   |   |
| Deptor I                               |                           | Sterling<br>First Name    | Middle N   | ame                  | Martin<br>Last Name   |   |   |   |
| Debtor 2<br>(Spouse, if fi             | lina)                     | First Name                | Middle N   | om 0                 | Loot Nome   |   |   |   |
|  |                           |                           |  | ame                  | Last Name   |   |   |   |
| United Sta                             | ates Ba                   | ankruptcy Court for the:  | Northern   |                      | District of Illinois (State)                                  |   |   |   |
| Case num<br>(If known)                 | nber                      |                           |  |                      |   |   |   |   |
| Officia                                | ıl Fo                     | orm 106A/B                |  |                      |   |   |   | Check if this is an                                     |
|  |                           | -                         |  |                      |   |   |   | amended filing  |
|  |                           | e A/B: Prope              |  |                      |   |   |   | 12/1  |
| category v<br>responsibl<br>write your | where<br>le for s<br>name | you think it fits best. E | Be as complete and mation. If more spansor, anown). Answer expression of the contract of the c | nd a<br>pace<br>very | ccurate as possible. It<br>is needed, attach a s<br>question. | f two married people<br>separate sheet to thi | han one category, list the<br>are filing together, both a<br>s form. On the top of any a<br>re an Interest In | are equally   |
|  |                           | or have any legal or ed   | •  |                      |   |   |   |   |
| <b>₩</b>                               |                           | io to Part 2              | ,  |                      | , ,   | ,   | - • • ·   |   |
| H                                      | Yes. \                    | Where is the property?    |  |                      |   |   |   |   |
|  |                           |                           |  | Wh                   | at is the property? Ch  | neck all that apply.                          | Do not deduct secured   | claims or exemptions. Put                               |
| 1.1                                    | Street                    | address, if available, or | other description  |                      | Single-family home  |   |   | ured claims on Schedule D:<br>aims Secured by Property. |
|  | 000                       | addisos, ii dvalidolo, ol | ouror docompaion   |                      | Duplex or multi-unit bu                                       | =   | Current value of the  | Current value of the                                    |
|  |                           |                           |  |                      | Condominium or coop  Manufactured or mobi                     |   | entire property?  | portion you own?  |
|  |                           |                           |  | H                    | Land  |   |   |   |
|  | Numl                      | per Street                |  |                      | Investment property   |   | Describe the nature of<br>interest (such as fee s   |   |
|  | City                      | State                     | Zip Code   |                      | Timeshare<br>Other  |   | the entireties, or a life   |   |
|  | ·                         |                           | ·  |                      | o has an interest in th                                       | ne property? Check                            | Check if this is co   | ommunity property                                       |
|  |                           |                           |  | one                  | e.<br>Debtor 1 only   |   |   |   |
|  |                           |                           |  | Е                    | Debtor 2 only   |   |   |   |
|  |                           |                           |  |                      | Debtor 1 and Debtor 2   | only  |   |   |
|  |                           |                           |  |                      | At least one of the deb                                       | tors and another                              |   |   |
|  |                           |                           |  |                      | ner information you w<br>perty identification n               |   | item, such as local   |   |
| If you                                 | own c                     | or have more than one, li | st here:   |                      | , ,   |   |   |   |
|  |                           |                           |  | Wh                   | at is the property? Ch  | neck all that apply.                          | Do not deduct secured   | claims or exemptions. Put ured claims on Schedule D:    |
| 1.2                                    | Street                    | address, if available, or | other description  |                      | Single-family home  Duplex or multi-unit bu                   | vildin a                                      |   | aims Secured by Property.                               |
|  |                           |                           |  | H                    | Condominium or coop   | ě .   | Current value of the  | Current value of the                                    |
|  |                           |                           |  | H                    | Manufactured or mobi  |   | entire property?  | portion you own?  |
|  | Numl                      | per Street                | _  |                      | Land  |   | <b></b>   |   |
|  | Num                       | Jei Greet                 |  |                      | Investment property   |   | Describe the nature of<br>interest (such as fee s   | simple, tenancy by                                      |
|  | City                      | State                     | Zip Code   | H                    | Timeshare<br>Other  |   | the entireties, or a life   | e estate), if known.                                    |
|  |                           |                           |  | Wh<br>one            | o has an interest in th                                       | ne property? Check                            | Check if this is co<br>(see instructions)   | ommunity property                                       |
|  |                           |                           |  |                      | Debtor 1 only   |   |   |   |
|  |                           |                           |  |                      | Debtor 2 only   |   |   |   |
|  |                           |                           |  |                      | Debtor 1 and Debtor 2   | -   |   |   |
|  |                           |                           |  |                      | At least one of the deb                                       |   |   |   |
|  |                           |                           |  |                      | ner information you w<br>perty identification n               |   | item, such as local   |   |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 11 of 69

| Debtor 1    | Sterling<br>First Name                                      | Middle Name                               | Martin<br>Last Name   | Case number         | (if known)  |  |
|-------------|---|---|---|---------------------|---|--|
| 1.3 Stre    | et address, if available, or ot                             | [   | That is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home                    | apply.              | the amount of any secu  | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.  Current value of the portion you own? |
| Nur<br>City | nber Street<br>State  | Zip Code                                  | Land Investment property Timeshare Other  | _                   | Describe the nature or interest (such as fee sthe entireties, or a life | imple, tenancy by  |
|             |   | []<br>[]<br>[]<br>0                       | //ho has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an ther information you wish to add | nother              | Check if this is co<br>(see instructions)  such as local                | mmunity property   |
|             | the dollar value of the pove attached for Part 1. Wr        | rtion you own for a<br>ite that number he |   | uding any entries   | s for pages   |  |
| Do you ov   |   | equitable interest                        | in any vehicles, whether they are   |                     |   |  |
|             | ans, trucks, tractors, sport ut                             |   | lso report it on Schedule G: Executo<br>ycles   | ory Contracts and I | Unexpired Leases.   |  |
| 3.1         | Model:<br>Year:   | Chevy Cavalier 2005 131000                | Who has an interest in the proone.  Debtor 1 only   | perty? Check        | the amount of any secu  | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.                                      |
|             | Approximate mileage: Other information: 2005 Chevy Cavalier | 131000                                    | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community  |                     | Current value of the entire property?<br>\$1575.00                      | Current value of the portion you own?<br>\$1575.00   |
| 3.2         | Make<br>Model:<br>Year:                                     |   | who has an interest in the proone.  Debtor 1 only   | perty? Check        | the amount of any secu  | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.   |
|             | Approximate mileage: Other information:                     |   | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions)  |                     | Current value of the entire property?                                   | Current value of the portion you own?  |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 12 of 69

| otor i | Sterling<br>First Name   | Middle Name | Martin<br>Last Name   | Case number   | er (if known)   |  |
|--------|--|-------------|---|---|---|--|
| 3.3    | Make<br>Model:<br>Year:<br>Approximate mileage:  |             | Who has an interest in the pone.  Debtor 1 only Debtor 2 only   |   | the amount of any secu  | claims or exemptions. Pured claims on Schedule Laims Secured by Property.  Current value of the portion you own? |
|        | Other information:   |             | Debtor 1 and Debtor 2 on At least one of the debtors  Check if this is communinstructions)  | and another   | -   |  |
| 3.4    | Make<br>Model:<br>Year:<br>Approximate mileage:  |             | Who has an interest in the pone.  Debtor 1 only Debtor 2 only   | oroperty? Check   | the amount of any secu  | claims or exemptions. Pured claims on Schedule Lims Secured by Property.  Current value of the                   |
|        | Other information:   |             | Debtor 1 and Debtor 2 on  At least one of the debtors  Check if this is commun  | and another   | entire property?  | portion you own?   |
|        |  | •           | instructions)  er recreational vehicles, other, fishing vessels, snowmobiles, r   | •   |   |  |
| Exar   | nples: Boats, trailers, motors<br>No<br>Yes  | •           | er recreational vehicles, other<br>, fishing vessels, snowmobiles, r  | notorcycle accessori                                    | ies   | claims or exemptions. Pu   |
| Exar   | nples: Boats, trailers, motors<br>No<br>Yes  | •           | er recreational vehicles, other   | notorcycle accessori                                    | Do not deduct secured the amount of any secu  | red claims on <i>Schedule</i>  |
| Exar   | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:<br>Approximate mileage: | •           | who has an interest in the pone.  Debtor 1 only Debtor 2 only   | notorcycle accessori  oroperty? Check  ly s and another | Do not deduct secured the amount of any secu Creditors Who Have Cla   |  |
| 4.1    | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:<br>Approximate mileage: | •           | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communication. | property? Check  ly s and another  lity property (see   | Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured the amount of any secu | red claims on Schedule<br>hims Secured by Property<br>Current value of the                                       |

#### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 13 of 69

Debtor 1 Sterling Martin Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Household Furniture \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used Tv, used iphone \$450.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used clothing \$250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1000.00 for Part 3. Write that number here .....

#### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 14 of 69

Martin Debtor 1 Sterling Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Fifth Third \$1500.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 15 of 69

| Dep. | tor 1 Sterling First Name                          | Middle Neme   | Martin<br>Last Namo        | Case number (if known)                      |               |
|------|--|---|----------------------------|---|---------------|
| 20.  | Government and corp                                | Middle Name  orate bonds and other negotial include personal checks, cashiers'    |                            |   |               |
|      |  | ents are those you cannot transfe   |                            |   |               |
|      | ✓ No  Yes. Give specific information about them    | Issuer name:  |                            |   |               |
|      |  |   |                            |   |               |
|      |  |   |                            |   |               |
|      |  |   |                            |   |               |
| 21.  | Retirement or pension<br>Examples: Interests in IF |   | , thrift savings accounts  | s, or other pension or profit-sharing plans |               |
|      | <b>✓</b> No  |   |                            |   |               |
|      | Yes. List each                                     | Type of account:  | Institution name:          |   |               |
|      | account separately.                                | 401(k) or similar plan:   | -                          |   |               |
|      | зерагатегу.  | Pension plan:   |                            |   |               |
|      |  | IRA:  |                            |   |               |
|      |  | Retirement account:   |                            |   |               |
|      |  | Keogh:  |                            |   |               |
|      |  | Additional account:   |                            |   |               |
|      |  | Additional account:   |                            |   |               |
| 22.  |  | prepayments I deposits you have made so that with landlords, prepaid rent, public |                            |   |               |
|      | No   |   | Institution name:          |   |               |
|      | ✓ Yes  | Electric:   |                            |   |               |
|      |  | Gas:  |                            |   |               |
|      |  | Heating oil:  |                            |   |               |
|      |  | Security deposit on rental unit:  |                            |   |               |
|      |  | Prepaid rent:   | Windsor Lakes Apartn       | nent  | \$500.00      |
|      |  | Telephone:  |                            |   |               |
|      |  | Water:  |                            |   |               |
|      |  | Rented furniture:   |                            |   |               |
|      |  | Other:  |                            |   |               |
| 23.  | Annuities (A contract fo                           | or a periodic payment of money to   | you, either for life or fo | or a number of years)                       |               |
|      | <b>✓</b> No  | Tanana and Jana Zallana   |                            |   |               |
|      | Yes  | Issuer name and description:  |                            |   |               |
|      |  |   |                            |   |               |
|      |  | -   |                            |   | · <del></del> |
|      |  |   |                            |   |               |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 16 of 69

| Debt | tor 1 Sterling First Name  | Middle   | Martin Name Last Name   | Case number (if known)   |  |
|------|--|--|---|--|--|
| 24.  | Interests in an ec   |  | count in a qualified ABLE program, or und   | er a qualified state tuition program.  |  |
|      | — ··   | (b)(1), 529A(b), and 529   | (b)(1).   |  |  |
|      |  | titution name and descrip  | ption. Separately file the records of any interes                                       | sts.11 U.S.C. § 521(c):  |  |
|      |  |  |   |  |  |
|      |  |  |   |  |  |
| 25.  | Trusts, equitable exercisable for yo   | =  | property (other than anything listed in line  | e 1), and rights or powers   |  |
|      | ✓ No Yes. Describe.  |  |   |  |  |
| 26.  |  |  | secrets, and other intellectual property es, proceeds from royalties and licensing agre | ements   |  |
|      | No Yes. Describe.  |  |   |  |  |
|      |  |  |   |  |  |
| 27.  |  | ises, and other general<br>g permits, exclusive licen  | I intangibles uses, cooperative association holdings, liquor                            | licenses, professional licenses  |  |
|      | <b>✓</b> No  |  |   |  |  |
|      | Yes. Describe.   |  |   |  |  |
|      |  |  |   |  |  |
| Mor  | ney or property o  | owed to you?   |   |  | Current value of the portion you own?  Do not deduct secured   |
|      |  |  |   |  | portion you own?   |
|      | Tax refunds owed   |  |   |  | portion you own? Do not deduct secured   |
|      | Tax refunds owed  No Yes. Give spec  | to you   | Est 2017 Federal Tax Refund   | Federal:   | portion you own? Do not deduct secured   |
|      | Tax refunds owed  No Yes. Give spec about the you already  | to you ific information  | Est 2017 Federal Tax Refund   | Federal:<br>State:   | portion you own?  Do not deduct secured claims or exemptions.  |
| 28.  | Tax refunds owed  No Yes. Give spec about the you alread and the tax   | to you  ific information em, including whether dy filed the returns  | Est 2017 Federal Tax Refund   |  | portion you own? Do not deduct secured claims or exemptions.  \$1100.00                                |
| 28.  | Tax refunds owed  No Yes. Give spec about the you alrear and the ta  Family support  Examples: Past due  | ific information em, including whether dy filed the returns ax years   | Est 2017 Federal Tax Refund spousal support, child support, maintenance,                | State: Local:  | portion you own? Do not deduct secured claims or exemptions.  \$1100.00  \$0.00  \$0.00                |
| 28.  | Tax refunds owed  No Yes. Give spectors about the you alread and the to the second sec | to you  ific information em, including whether dy filed the returns ax years                                   |   | State: Local:  | portion you own? Do not deduct secured claims or exemptions.  \$1100.00  \$0.00  \$0.00                |
| 28.  | Tax refunds owed  No Yes. Give spectors about the you alread and the to the second sec | ific information em, including whether dy filed the returns ax years   |   | State:  Local:  divorce settlement, property settlemen   | portion you own? Do not deduct secured claims or exemptions.  \$1100.00  \$0.00  \$0.00                |
| 28.  | Tax refunds owed  No Yes. Give spectors about the you alread and the to the second sec | to you  ific information em, including whether dy filed the returns ax years                                   |   | State: Local: divorce settlement, property settlemen Alimony:  | portion you own?  Do not deduct secured claims or exemptions.  \$1100.00  \$0.00  \$0.00  t            |
| 28.  | Tax refunds owed  No Yes. Give spectors about the you alread and the to the second sec | to you  ific information em, including whether dy filed the returns ax years                                   |   | State: Local:  divorce settlement, property settlemen  Alimony:  Maintenance:  | portion you own? Do not deduct secured claims or exemptions.  \$1100.00 \$0.00  t \$0.00 \$0.00        |
| 28.  | Tax refunds owed  No Yes. Give spectors about the you alread and the to the second sec | to you  ific information em, including whether dy filed the returns ax years                                   |   | State: Local:  divorce settlement, property settlemen  Alimony:  Maintenance:  Support:  | portion you own? Do not deduct secured claims or exemptions.  \$1100.00 \$0.00  t \$0.00 \$0.00 \$0.00 |
| 28.  | Tax refunds owed  No Yes. Give spect about the you alread and the to the second | ific information em, including whether dy filed the returns ax years e or lump sum alimony, s ific information |   | State: Local:  divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$1100.00 \$1100.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00                                   |
| 28.  | Tax refunds owed  No  Yes. Give spectabout the you alread and the tax  Family support  Examples: Past due  No  Yes. Give spectation  Other amounts so Examples: Unpaid of Social Sectamples  | ific information em, including whether dy filed the returns ax years e or lump sum alimony, s ific information | spousal support, child support, maintenance,  | State: Local:  divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$1100.00 \$1100.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00                                   |
| 29.  | Tax refunds owed  No Yes. Give spectabout the you alread and the tax  Family support  Examples: Past due  No Yes. Give spectation  Other amounts so  Examples: Unpaid of Social Sectamples:  | ific information em, including whether dy filed the returns ax years e or lump sum alimony, s ific information | spousal support, child support, maintenance,  | State: Local:  divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$1100.00 \$1100.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00                                   |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 17 of 69

| Deb  | tor 1 Sterling                                      |                           | Martin  | Case number (if known)                      |  |
|------|---|---------------------------|---|---|--|
|      | First Name  | Middle Name               | Last Name   |   |  |
| 31.  | Interests in insurance paramples: Health, disabil   |                           | alth savings account (HSA); credit, h                               | nomeowner's, or renter's insurance          |  |
|      | No Yes. Name the insurrof each policy and list      |                           | Company name:   | Beneficiary:                                | Surrender or refund value:   |
| 32.  |   | of a living trust, expect | someone who has died<br>proceeds from a life insurance polic        | y, or are currently entitled to receive     |  |
|      | Yes. Describe                                       |                           |   |   |  |
| 33.  |   |                           | you have filed a lawsuit or made<br>urance claims, or rights to sue | a demand for payment                        |  |
| 34.  | Other contingent and u                              | <br>Inliquidated claims o | f every nature, including counter                                   | claims of the debtor and rights             |  |
|      | ✓ No Yes. Describe                                  |                           |   |   |  |
| 35.  | Any financial assets yo                             | u did not already list    |   |   |  |
|      | ✓ No  Yes. Describe                                 |                           |   |   |  |
| 36.  |   | -                         | m Part 4, including any entries fo                                  |   | \$3100.00  |
| Part | 5: Describe Any Bu                                  | siness-Related Pro        | operty You Own or Have an I   | nterest In. List any real estate in P       | art 1.   |
| 37.  | Do you own or have an                               | / legal or equitable ir   | iterest in any business-related pr                                  | operty?                                     |  |
|      | No. Go to Part 6. Yes. Go to line 38.               |                           |   |   | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38.  | Accounts receivable or                              | commissions you ali       | eady earned   |   | ·  |
|      | Yes. Describe                                       |                           |   |   |  |
| 39.  | Office equipment, furni<br>Examples: Business-relat |                           | e, modems, printers, copiers, fax ma                                | achines, rugs, telephones, desks, chairs, e | lectronic devices  |
|      | No Yes. Describe                                    |                           |   |   |  |
|      |   |                           |   |   |  |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 18 of 69

| Deb      | tor 1 Sterling              | Martin  | Case number (if known)     |  |
|----------|-----------------------------|---|----------------------------|--|
| 1.0      | First Name                  | Middle Name Last Name   |                            |  |
| 40.      | Machinery, fixtures, equi   | pment, supplies you use in business, and tools of your trade          | 1                          |  |
|          | <b>✓</b> No                 |   |                            |  |
|          | Yes. Describe               |   |                            |  |
|          |                             |   |                            |  |
| 44       |                             | <del></del>   |                            |  |
| 41.      | Inventory                   |   |                            |  |
|          | <b>✓</b> No                 |   |                            |  |
|          | Yes. Describe               |   |                            |  |
|          |                             |   |                            |  |
| 12       | Interests in partnerships   | or joint ventures   |                            |  |
| 72.      |                             | or joint ventures   |                            |  |
|          | <b>✓</b> No                 | Name of entity:   | % of ownership:            |  |
|          | Yes. Give specific          | Thains of Smily!  | /c c. c                    |  |
|          | information about them      |   |                            | <u> </u>                                       |
|          |                             |   |                            |  |
|          |                             |   |                            |  |
| 12       | Customer lists, mailing lis | te or other compilations  |                            |  |
| 45.      |                             | is, or other compliations   |                            |  |
|          | <b>✓</b> No                 |   |                            |  |
|          | Yes. Do your lists inclu    | ude personally identifiable information (as defined in 11 U.S.C. § 1  | 101(41A))?                 |  |
|          | ☐ No                        |   |                            |  |
|          | Yes. Describe               |   |                            |  |
|          | 100. 2000/100               |   |                            |  |
| 44.      | Any business-related pro    | perty you did not already list  |                            |  |
|          | <b>√</b> No                 |   |                            |  |
|          | Yes. Give specific          |   |                            | <del>_</del>                                   |
|          | information                 |   |                            | <u> </u>                                       |
|          |                             |   |                            |  |
|          |                             |   |                            | <del>_</del>                                   |
|          |                             |   |                            | <u> </u>                                       |
|          |                             |   |                            |  |
|          |                             |   |                            |  |
|          |                             |   |                            | <u> </u>                                       |
|          |                             |   |                            |  |
|          |                             | of your entries from Part 5, including any entries for pages your ere |                            |  |
| <b>•</b> | art o. write that humber h  |   |                            |  |
| Part     | 6: Describe Any Farn        | n- and Commercial Fishing-Related Property You O                      | wn or Have an Interest In. |  |
|          | If you own or have an inte  | erest in farmland, list it in Part 1.                                 |                            |  |
| 46.      | Do you own or have any      | legal or equitable interest in any farm- or commercial fishin         | g-related property?        |  |
|          | No. Go to Part 7.           |   |                            | Current value of the                           |
|          | Yes. Go to line 47.         |   |                            | portion you own?  Do not deduct secured claims |
|          | 100. 00 10 1110 17.         |   |                            | or exemptions                                  |
| 47.      | Farm animals                |   |                            |  |
|          | Examples: Livestock, poult  | ry, farm-raised fish  |                            |  |
|          | <b>✓</b> No                 |   |                            |  |
|          | Yes. Describe               |   |                            |  |
|          |                             |   |                            |  |
|          |                             |   |                            |  |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 19 of 69

| Debt         | tor 1 Sterling First Name  |   | Martin (ast Name        | Case number (if known)       |               |
|--------------|----------------------------|---|-------------------------|------------------------------|---------------|
| 48.          | Crops-either growing       |   |                         |                              |               |
|              | No Yes. Describe           |   |                         |                              |               |
| 49.          | Farm and fishing equip     | oment, implements, machinery, fixture     | es, and tools of trade  |                              |               |
|              | <b>✓</b> No                |   |                         |                              |               |
|              | Yes. Describe              |   |                         |                              |               |
| 50.          | Farm and fishing supp      | lies, chemicals, and feed                 |                         |                              |               |
|              | <b>✓</b> No                |   |                         |                              |               |
|              | Yes. Describe              |   |                         |                              |               |
|              |                            |   |                         |                              |               |
| 51.          |                            | rcial fishing-related property you did r  | not already list        |                              |               |
|              | ✓ No  Yes. Describe        |   |                         |                              |               |
|              |                            |   |                         |                              |               |
|              |                            | Il of your entries from Part 6, including |                         | ı have attached              |               |
| TOT Pa       | art 6. Write that number   | r here                                    |                         |                              |               |
|              |                            |   |                         |                              |               |
| Part 1       | 7: Describe All Pro        | perty You Own or Have an Intere           | est in That You Did Not | List Above                   |               |
|              | Do you have other prop     | perty of any kind you did not already li  |                         |                              |               |
|              |                            | s, country club membership                |                         |                              |               |
|              | ✓ No  Yes. Give specific   |   |                         |                              |               |
|              | information                |   |                         |                              |               |
|              |                            |   |                         |                              |               |
|              |                            |   |                         | ,                            |               |
| 54. A        | dd the dollar value of al  | ll of your entries from Part 7. Write tha | at number here          |                              |               |
|              |                            |   |                         |                              |               |
|              |                            |   |                         |                              |               |
|              | _                          |   |                         |                              |               |
| Part         | 8: List the Totals of      | Each Part of this Form                    |                         |                              | <del>-,</del> |
| 55. <b>F</b> | Part 1: Total real estate  | , line 2                                  |                         | <b>&gt;</b>                  |               |
| 56. <b>r</b> | oart 2 total vehicles, lin | e 5                                       | \$1575.00               |                              |               |
| 57. <b>P</b> | art 3: Total personal an   | nd household items, line 15               | \$1000.00               |                              |               |
| 58. <b>P</b> | art 4: Total financial as  | ssets, line 36                            | \$3100.00               |                              |               |
| 59. <b>F</b> | Part 5: Total business-re  | elated property, line 45                  | <u> </u>                |                              |               |
| 60. <b>F</b> | Part 6: Total farm- and f  | fishing-related property, line 52         |                         |                              |               |
| 61. <b>F</b> | Part 7: Total other prop   | erty not listed, line 54                  |                         |                              |               |
| 62.1         | Total personal property.   | Add lines 56 through 61                   | \$5675.00               | Copy personal property total | + \$5675.00   |
|              |                            |   |                         |                              | \$5675.00     |
| 63. <b>T</b> | otal of all property on S  | Schedule A/B. Add line 55 + line 62       |                         |                              | Ψ0070.00      |

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 20 of 69

| Name Last Name       |
|----------------------|
|                      |
|                      |
| Name Last Name       |
| District of Illinois |
| (State)              |
|                      |
|                      |

### Official Form 106C

### Check if this is an amended filing

### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | rt 1: Identify the Property You Clair   | m as Exempt   |   |   |  |  |
|----|---|---|---|---|--|--|
| 1. | Which set of exemptions are you claim   | ing? Check one only, ev   | ven if your spouse is filing with you.  |   |  |  |
|    | You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)      |   |   |   |  |  |
|    | You are claiming federal exemption  | ns. 11 U.S.C. § 522(b)(   | 2)  |   |  |  |
| 2. | For any property you list on Schedule A   | N/B that you claim as e   | exempt, fill in the information below.  |   |  |  |
|    | Brief description of the property and line on Schedule A/B that lists this property     | Current value of<br>the portion you<br>own<br>Copy the value from<br>Schedule A/B | Amount of the exemption you claim  Check only one box for each exemption.                           | Specific laws that allow exemption              |  |  |
|    | Brief description: Chevy Cavalier, 2005, 2005 Chevy Cavalier Line from Schedule A/B: 03 | \$1,575.00  | \$1,575.00; \$0.00  100% of fair market value, up to any applicable statutory limit                 | 735 ILCS 5/12-1001(c); 735 ILCS<br>5/12-1001(b) |  |  |
|    | Brief description: Used Household Furniture Line from Schedule A/B: 06                  | \$300.00  | \$300.00  100% of fair market value, up to any applicable statutory limit                           | 735 ILCS 5/12-1001(b)                           |  |  |
| 3. | <b>✓</b> No   | ery 3 years after that for  | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? |   |  |  |

#### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Page 21 of 69 Document

Debtor 1 Sterling Martin Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$450.00 description: **✓** \$450.00 Used Tv, used iphone 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(a) \$250.00 description: **✓** \$250.00 Used clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$1,500.00 description: **✓** \$1,500.00 Checking account, Fifth 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) \$500.00 description: **✓** \$500.00 Prepaid rent, Windsor 100% of fair market value, up to any **Lakes Apartment** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$1,100.00 description: **✓** \$1,100.00

100% of fair market value, up to any

applicable statutory limit

Federal, Est 2017

Line from Schedule A/B:

**Federal Tax Refund** 

28

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 22 of 69

|                       |                                     | _ ,                          | . a.g. == 0:   |  |   |                                    |
|-----------------------|-------------------------------------|------------------------------|--|--|---|------------------------------------|
| Fill in thi           | s information to identify your c    | ase:                         |  |  |   |                                    |
| Debtor 1              | Sterling                            |                              | Martin   |  |   |                                    |
|                       | First Name                          | Middle Name                  | Last Name  |  |   |                                    |
| Debtor 2              |                                     |                              |  |  |   |                                    |
| (Spouse, if           | filing) First Name                  | Middle Name                  | Last Name  |  |   |                                    |
| United S              | states Bankruptcy Court for the:    | Northern                     | District of Illinois   |  |   |                                    |
|                       |                                     |                              | (State)  |  |   |                                    |
| Case nu<br>(If known) | mber                                |                              |  |  |   |                                    |
| Offic                 | ial Form 106D                       |                              |  | _  |   | Check if this is an amended filing |
| Sch                   | edule D: Credit                     | ors Who Ha                   | ve Claims Secur  | ed by Prop   | erty  | 12/15                              |
| more spa              |                                     |                              | le are filing together, both are equ<br>mber the entries, and attach it to t                               | •  |   |                                    |
| 1. <b>Do</b>          | any creditors have claims s         | secured by your proper       | rty?   |  |   |                                    |
| <b>✓</b>              | No. Check this box and sub-         | mit this form to the court   | with your other schedules. You have  | ve nothing else to repo  | ort on this form.                                     |                                    |
|                       | Yes. Fill in all of the information | on below.                    |  |  |   |                                    |
| Part 1:               | List All Secured Claims             |                              |  |  |   |                                    |
| for                   |                                     | ditor has a particular claim | ured claim, list the creditor separately, list the other creditors in Part 2. As g to the creditor's name. | Column A  Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any  |

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 23 of 69

| Fill in this infor  |   |   |   |  |  |   |  |
|---|---|---|---|--|--|---|--|
| FIII IN this infor  | mation to identify your ca  | se:   |   |  |  |   |  |
| Debtor 1  | Sterling  |   | Martin  |  |  |   |  |
| Dahta : 0   | First Name  | Middle Name   | Last Name   |  |  |   |  |
| Debtor 2<br>(Spouse, if filing)   | First Name  | Middle Name   | Last Name   | _  |  |   |  |
| United States E   | Bankruptcy Court for the:   | Northern  | District of Illinois (State)  | _  |  |   |  |
| Case number   |   |   | (Otato)   | _  |  |   |  |
|   | orm 106E/F  |   |   |  | Chec   | k if this is an   | amended filing                           |
|   |   | alitawa NA/la a   | . Hava Haaaav   |  |  |   |  |
| Scheal  | lie E/F: Cre  | aitors wno  | Have Unsecu   | red Claim  | S  |   | 12/15                                    |
| Form 106A/B) a<br>claims that are<br>the entries in t<br>known).                                  | and on Schedule G: Exec<br>e listed in Schedule D: Cr   | utory Contracts and Un<br>editors Who Hold Clain<br>ach the Continuation P  | at could result in a claim. Also<br>nexpired Leases (Official Form<br>ns Secured by Property. If more<br>Page to this page. On the top o  | 106G). Do not include<br>space is needed, co                                       | e any creditors  py the Part yo                      | with partial<br>u need, fill it                         | lly secured<br>out, number               |
| 1. Do any c   |   |   | _   |  |  |   |  |
| No. 0  ✓ Yes.  2. List all or   | Go to Part 2.   |   | more than one priority unsecured  |  |  |   |  |
| No. 0 Yes.  2. List all or listed, ider As much Continuate  | Go to Part 2.  f your priority unsecured ntify what type of claim it is as possible, list the claims ion Page of Part 1. If more  | claims. If a creditor has<br>s. If a claim has both prio<br>in alphabetical order acco<br>than one creditor holds |   | that claim here and sho<br>ou have more than two<br>editors in Part 3.             | w both priority                                      | and nonprior  | ity amounts.                             |
| No. 0 Yes.  2. List all or listed, ider As much Continuate  | Go to Part 2.  f your priority unsecured ntify what type of claim it is as possible, list the claims ion Page of Part 1. If more  | claims. If a creditor has<br>s. If a claim has both prio<br>in alphabetical order acco<br>than one creditor holds | more than one priority unsecured ority and nonpriority amounts, list ording to the creditor's name. If year a particular claim, list the other creditions.  | that claim here and sho<br>ou have more than two<br>editors in Part 3.             | w both priority                                      | and nonprior  | ity amounts.                             |
| No. 0 Yes.  2. List all or listed, ider As much Continuat (For an example)                        | Go to Part 2.  f your priority unsecured ntify what type of claim it is as possible, list the claims ion Page of Part 1. If more planation of each type of c                      | claims. If a creditor has<br>s. If a claim has both prio<br>in alphabetical order acco<br>than one creditor holds | more than one priority unsecured ority and nonpriority amounts, list ording to the creditor's name. If year a particular claim, list the other creditions.  | that claim here and sho<br>ou have more than two<br>editors in Part 3.<br>ooklet.) | w both priority<br>priority unsecu                   | and nonpriori<br>red claims, fill<br>Priority           | ity amounts. I out the  Nonpriority      |
| No. 0 Yes.  2. List all or listed, ider As much Continuat (For an example)                        | Go to Part 2.  f your priority unsecured ntify what type of claim it is as possible, list the claims ion Page of Part 1. If more xplanation of each type of coreditor's Name      | claims. If a creditor has<br>s. If a claim has both prio<br>in alphabetical order acco<br>than one creditor holds | more than one priority unsecured ority and nonpriority amounts, list ording to the creditor's name. If y a particular claim, list the other cress for this form in the instruction b  | that claim here and sho<br>bu have more than two<br>editors in Part 3.<br>ooklet.) | w both priority<br>priority unsecu<br>Total<br>claim | and nonpriori<br>red claims, fill<br>Priority<br>amount | ity amounts. Out the  Nonpriority amount |
| No. 0 Yes.  2. List all or listed, ider As much Continuat (For an experience)  2.1 IRS Priority 0 | Go to Part 2.  f your priority unsecured ntify what type of claim it is as possible, list the claims ion Page of Part 1. If more xplanation of each type of coreditor's Name 7346 | claims. If a creditor has<br>s. If a claim has both prio<br>in alphabetical order acco<br>than one creditor holds | more than one priority unsecured that one priority and nonpriority amounts, list ording to the creditor's name. If y a particular claim, list the other cress for this form in the instruction be Last 4 digits of account numbers. | that claim here and shoot have more than two editors in Part 3. cooklet.)          | w both priority<br>priority unsecu<br>Total<br>claim | and nonpriori<br>red claims, fill<br>Priority<br>amount | ity amounts. Out the  Nonpriority amount |

✓ No Yes

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 24 of 69

| Debte  | or 1          | Sterling  | Martin      | Case number (if known)  |                                      |
|--------|---------------|---|-------------|---|--------------------------------------|
|        |               | First Name Middle Name  | Last Name   |   |                                      |
| Part : | 2:            | List All of Your NONPRIORITY Unsecured Clair  | ns          |   |                                      |
| [      | 00 a          | any creditors have nonpriority unsecured claims agains  No. You have nothing to report in this part. Submit this  Yes.  |             | e court with your other schedules.  |                                      |
| l<br>I | inse<br>f m   | ecured claim, list the creditor separately for each claim. For e  | ach claim I | er of the creditor who holds each claim. If a creditor has more to isted, identify what type of claim it is. Do not list claims already income Part 3.If you have more than four priority unsecured claims fill out   | luded in Part 1.<br>the Continuation |
|        |               |   |             |   | Total claim                          |
| 4.1    | No            | CCEPTANCE NOW<br>onpriority Creditor's Name<br>288 Dawson Blvd  |             | Last 4 digits of account number 0414 When was the debt incurred? 12/2011  | \$0.00                               |
|        | _             | umber Street  |             |   |                                      |
|        | Ci            | ho incurred the debt? Check one.  |             | As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  |                                      |
|        |               | Debtor 1 only   |             | Type of NONPRIORITY unsecured claim:  |                                      |
|        |               | At least one of the debtors and another  Check if this claim relates to a community debt the claim subject to offset?   |             | Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify 036 UnknownLoanType   |                                      |
| 4.2    | A             | CCEPTANCE NOW   |             | Lost 4 digits of account number 0417  | \$0.00                               |
| 4.3    | No 62 No Co W | conpriority Creditor's Name 288 Dawson Blvd umber Street  Corcross Georgia 30093 City State Zip Code Cho incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt the claim subject to offset? |             | When was the debt incurred? 12/2011  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify 036 UnknownLoanType                | \$0.00                               |
| 4.0    | W Ci          | condland HIs California 91367  Ity State Zip Code  Code the incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  the claim subject to offset?   |             | When was the debt incurred? 10/2015  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  001 Collection; Collecting for ORIGINAL CREDITOR: | \$0.00                               |
|        | Ľ             | ✓ No<br>Yes   |             | Other. Specify ENTERPRISE RENT A CAR 15DD   |                                      |

### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 25 of 69

Debtor 1 Sterling Martin Case number (if known) Last Name Case number (if known)

| Part 2 | Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page   |  |             |  |  |  |  |
|--------|---|--|-------------|--|--|--|--|
|        | After listing any entries on this page, number them beginning wit   | h 4.5, followed by 4.6, and so forth.  | Total claim |  |  |  |  |
| 4.4    | After listing any entries on this page, number them beginning with CAPITALONE  Nonpriority Creditor's Name c/o Pollack & Rosen, P.C  Number Street  1825 Barrett Lakes Blvd Suite 510  Kennesaw Georgia 30144  City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  Yes | th 4.5, followed by 4.6, and so forth.  Last 4 digits of account number 2442  When was the debt incurred? 6/2014  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard | \$0.00      |  |  |  |  |
| 4.5    | Chase Bank Nonpriority Creditor's Name 230 W. Monroe St. Number Street  Chicago Illinois 60606 City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes  | When was the debt incurred?  | \$300.00    |  |  |  |  |
| 4.6    | CHRYSLER Capital Nonpriority Creditor's Name 91 WALL STREET POB 666 Number Street  MADISON Connecticut 06443 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  Yes   | Last 4 digits of account number 1000  When was the debt incurred? 11/2013  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Repossessed Vehicle                             | \$20,511.00 |  |  |  |  |

### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 26 of 69

 Debtor 1 First Name
 Sterling First Name
 Martin Middle Name
 Case number (if known)

| atter nating any entires on this page, number them beginning | g with 4.5, followed by 4.6, and so forth.  | Total claim |
|--|---|-------------|
| City of Aurora   | — Last 4 digits of account number   | \$1,000.00  |
| Nonpriority Creditor's Name<br>1 S. Broadway                 | When was the debt incurred? n/a   |             |
| Number Street  | <u> </u>  |             |
|  | As of the date you file, the claim is: Check all that apply.  |             |
|  | Contingent  |             |
| Aurora Illinois 60505  | Unliquidated  |             |
| City State Zip Code  Who incurred the debt? Check one.       | Disputed  |             |
| Debtor 1 only  | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 2 only  | Student loans   |             |
| Debtor 1 and Debtor 2 only                                   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| At least one of the debtors and another                      | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| Check if this claim relates to a community debt              | Other. Specify Red light and Parking tickets  |             |
| s the claim subject to offset?                               | _   |             |
| <b>✓</b> No  |   |             |
| Yes  |   |             |
| CONSUMERS COOP CRED UN                                       | Last 4 digits of account number 6901  | \$2,574.00  |
| Nonpriority Creditor's Name                                  | When was the debt incurred? 8/2015  |             |
| 2750 WASHINGTON ST<br>Number Street                          | <u> </u>  |             |
|  | As of the date you file, the claim is: Check all that apply.  |             |
| WAUKEGAN Illinois 60085                                      | Contingent  |             |
| City State Zip Code  | Unliquidated  |             |
| Who incurred the debt? Check one.                            | Disputed  |             |
| Debtor 1 only  | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 2 only  | Student loans   |             |
| Debtor 1 and Debtor 2 only                                   | Obligations arising out of a separation agreement or  |             |
| At least one of the debtors and another                      | divorce that you did not report as priority claims  |             |
| Check if this claim relates to a community debt              | Debts to pension or profit-sharing plans, and other similar   |             |
| Check if this claim relates to a community debt              | ── debts ✓ Other. Specify 048 InstallmentLoan   |             |
| Is the claim subject to offset?  No                          | Other. Specify048 InstallmentLoan   |             |
|  |   |             |
| Yes  |   |             |
| CREDIT ONE BANK NA   | Last 4 digits of account number 7338  | \$1,100.00  |
| Nonpriority Creditor's Name<br>PO BOX 98875                  | When was the debt incurred? 2/2015  |             |
| Number Street  | <del></del>   |             |
|  | As of the date you file, the claim is: Check all that apply.  Contingent                                |             |
|  |   |             |
| LAS VEGAS Nevada 89193                                       | Unliquidated  |             |
| City State Zip Code  Who incurred the debt? Check one.       | Disputed  |             |
| Debtor 1 only  | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 2 only  | Student loans   |             |
| Debtor 1 and Debtor 2 only                                   | Obligations arising out of a separation agreement or  |             |
|  | divorce that you did not report as priority claims  |             |
| At least one of the debtors and another                      | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|  |   |             |
| Check if this claim relates to a community debt              | ✓ Other. Specify <u>CreditCard</u>  |             |

#### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 27 of 69

Debtor 1 Sterling Martin Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 **GATEWYFINSOL** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1/2012 221 North La Salle Street # 1000 Number As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60601 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_ Automobile Is the claim subject to offset? **✓** No Yes 4.11 I C SYSTEM \$0.00 Last 4 digits of account number 4458 Nonpriority Creditor's Name 12/2015 Po Box 64378 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Saint Paul Minnesota 55164 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓ ORIGINAL CREDITOR: 11 ✓** No Other. Specify SPRINT Yes Illinois Tollway 4.12 \$15,000.00 Last 4 digits of account number Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated Downers Grove Illinois 60515 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify \_

Past Due Tolls

#### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 28 of 69

Debtor 1 Sterling Martin Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 **KEYNOTE CONS** \$2,574.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4/2017 1501 West Dundee Number Street As of the date you file, the claim is: Check all that apply. Contingent Buffalo Grove Illinois 60089 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **| ORIGINAL CREDITOR: 01 ✓** No CONSUMERS COOPERATIVE CREDIT U Other. Specify Yes 4.14 MIDLAND FUNDING \$961.00 Last 4 digits of account number 7483 Nonpriority Creditor's Name 2365 Northside Drive When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent California 92108 San Diego Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify \_\_\_\_\_ 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes Navient 4.15 \$6,410.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 1/2007 Number As of the date you file, the claim is: Check all that apply. Contingent **WILKES BARRE** 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

Yes

#### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 29 of 69

Debtor 1 Sterling Martin Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 Navient \$3,428.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 3/2006 Number Street As of the date you file, the claim is: Check all that apply. Contingent Pennsylvania WILKES BARRE 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.17 ONEMAIN \$0.00 Last 4 digits of account number 0449 Nonpriority Creditor's Name PO BOX 1010 When was the debt incurred? 9/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **EVANSVILLE** Indiana 47706 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ 036 InstallmentLoan Is the claim subject to offset? **✓** No Yes PEOPLES CREDIT, INC 4.18 \$9,031.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 115 E South St Ste 2 When was the debt incurred? 10/2016 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60545 Plano City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Repossessed Vehicle Is the claim subject to offset? **✓** No

Yes

#### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 30 of 69

Debtor 1 Sterling Martin Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 SYNCB/CAR CARE SYN CAR \$920.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965036 When was the debt incurred? 1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent **ORLANDO** Florida 32896 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ CreditCard Is the claim subject to offset? **✓** No Yes 4.20 VERIZON WIRELESS \$1,838.00 Last 4 digits of account number 8820 Nonpriority Creditor's Name P.O. Box 660108 When was the debt incurred? 5/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent Dallas 75266 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes Will County Circuit Clerk 4.21 \$3,000.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 3208 McDonough St When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Joliet Illinois 60431 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_ Court fees Is the claim subject to offset?

✓ No Yes Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 31 of 69

Debtor 1 Sterling Martin Case number (if known)

| FIRST Na                 | me Middle Name Last Name  |         |                      |        |
|--------------------------|---|---------|----------------------|--------|
| Part 4: Add t            | ne Amounts for Each Type of Unsecured Claim   |         |                      |        |
|                          | nmounts of certain types of unsecured claims. This information is<br>nounts for each type of unsecured claim. | s for s | tatistical reporting | purpos |
|                          |   |         | Total claims         |        |
| Total claims from Part 1 | 6a. Domestic support obligations.   | 6a.     | \$0.00               |        |
|                          | 6b. Taxes and certain other debts you owe the government  | 6b.     | \$7,200.00           |        |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c.     | \$0.00               |        |
|                          | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                   | 6d.     | \$0.00               |        |
|                          | 6e. Total. Add lines 6a through 6d.   | 6e.     | \$7,200.00           |        |
|                          |   |         | T                    |        |
|                          |   |         | Total claims         |        |
| Total claims from Part 2 | 6f. Student loans   | 6f.     | \$9,838.00           |        |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims   | 6g.     | \$0.00               |        |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts   | 6h.     | \$0.00               |        |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                                | 6i.     | \$58,809.00          |        |
|                          | 6i Total Add lines 6f through 6i  | 6i      | \$68,647.00          |        |

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 32 of 69

| Fill in this information to identify your case: |                           |             |                              |   |  |  |  |  |
|---|---------------------------|-------------|------------------------------|---|--|--|--|--|
| Debtor 1  | Sterling                  |             | Martin                       |   |  |  |  |  |
|   | First Name                | Middle Name | Last Name                    |   |  |  |  |  |
| Debtor 2  |                           |             |                              |   |  |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |   |  |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois (State) | _ |  |  |  |  |
| Case number<br>(If known)                       |                           |             | (State)                      |   |  |  |  |  |

### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or cor     | npany with whom you have | the contract or lease | State what the contract or lease is for |  |  |
|-------------------|--------------------------|-----------------------|---|--|--|
| 2.1 Windsor Lakes | s Apartments             |                       | Residential Lease,<br>Debtor is Lessee, |  |  |
| INAITIE           |                          |                       | Yearly Residential Lease                |  |  |
| 7499 Woodwa       | ard Ave                  |                       |   |  |  |
| Number            | Street                   |                       |   |  |  |
| Woodridge         | Illinois                 | 60517                 |   |  |  |
| City              | State                    | Zip Code              |   |  |  |

### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main

|               |  | Do  | cument Pag  | e 33 of 69   |  |
|---------------|--|---|---|--|--|
| Fill in this  | information to identify your   | case:   |   |  |  |
| Debtor 1      | Sterling   |   | Martin  |  |  |
| Debtor 2      | First Name   | Middle Name   | Last Name   |  |  |
| (Spouse, if f | iling) First Name  | Middle Name   | Last Name   |  |  |
| United St     | ates Bankruptcy Court for the  | : Northern  | District of Illinois  |  |  |
| Case nun      | nber   |   | (State)   |  |  |
| (If known)    |  |   |   |  | Check if this is an  |
| Offici        | ial Form 106H  |   |   |  | amended filing   |
|               | dule H: Your Co  | debtors   |   |  | 12/15  |
| 1. Do         | lifornia, Idaho, Louisiana, Nev<br>No. Go to line 3.<br>Yes. Did your spouse, fo | you lived in a community pada, New Mexico, Puerto R | oroperty state or territo<br>co, Texas, Washington, a<br>valent live with you at th | ry? (Community property<br>and Wisconsin.)<br>ne time? | v states and territories include Arizona,  |
|               |  |   |   | Fill in the name ar                                    | nd current address of that person.   |
|               | Name of your spouse,   | former spouse, or legal equ                         | ivalent   |  |  |
|               | Number Street  |   |   |  |  |
|               | City   | State   | Zip Co  | ode  |  |
| ag            | ain as a codebtor only if th   | at person is a guarantor o                          | r cosigner. Make sure y   | ou have listed the cred                                | g with you. List the person shown in line 2 itor on Schedule D (Official Form 106D), /F, or Schedule G to fill out Column 2. |
| Co            | olumn 1: Your codebtor   |   |   | Column 2: The  | creditor to whom you owe the debt  |
|               |  |   |   | Check all sched  | ules that apply:   |

Davis, Brittany Schedule D, line Name Schedule E/F, line 4.2 1015 Hamilton St.  $\checkmark$ Number Street Schedule G, line \_\_\_ Shorewood City 60404 Illinois State Zip Code

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 34 of 69

| Fill in th     | is information to identify                                     | your case:                              |                         |                |                     |   |           |
|----------------|--|---|-------------------------|----------------|---------------------|---|-----------|
| Debtor 1       | Sterling   |   | Martin                  |                |                     |   |           |
|                | First Name   | Middle Name                             | Last Na                 | me             | Che                 | ck if this is:  |           |
| Debtor 2       | filing) First Name   | Middle Name                             | Last Na                 | mo .           | _  ,                | An amended filing   |           |
|                |  |   |                         |                |                     | A supplement showing post-petition ch                             | napter 1º |
| United Sthe:   | tates Bankruptcy Court for                                     | Northern                                | District of Illin       |                |                     | expenses as of the following date:                                | apioi 1   |
| Case nur       | mber   |   | (00                     | ate)           |                     |   |           |
| (If known)     |  |   |                         |                |                     | MM / DD / YYYY  |           |
| Offici         | al Form 106I   |   |                         |                |                     |   |           |
| Sche           | dule I: Your In  | come                                    |                         |                |                     |   | 12/1      |
| spouse.        | If more space is needed<br>(if known). Answer ever             | l, attach a separate she<br>y question. |                         | _              |                     | not include information about you onal pages, write your name and |           |
|                | n your employment  |   | Debtor 1                |                |                     | Debtor 2  |           |
|                | mation.  | Employment status                       | <b>✓</b> Employ         | ed             |                     | Employed  |           |
|                | u have more than one job,<br>h a separate page with            |   | Not Em                  |                |                     | Not Employed  |           |
| infor          | mation about additional  |   |                         |                |                     |   |           |
|                | oyers.   | Occupation                              | Collision Re            | pair Lecn      |                     | -   |           |
|                | de part time, seasonal, or<br>employed work.                   | Employer's name                         | Spectro Aut             | o Body and Pa  | int, Inc.           |   |           |
| Occi           | pation may include student                                     | Employer's address                      | 8404 Wilme              |                |                     |   |           |
|                | memaker, if it applies.  |   | Number Stree Unit C     | et             |                     | Number Street   |           |
|                |  |   | Onico                   |                |                     | _   |           |
|                |  |   |                         |                |                     |   |           |
|                |  |   | Darien                  | Illinois       | 60561               |   |           |
|                |  |   | City                    | State          | Zip Code            | City State Zip Co.  | de        |
|                |  | How long employed there?                | 5 years 1 m             | onth           |                     |   |           |
|                | _  | there:                                  |                         |                |                     |   |           |
| Part 2:        | Give Details About N   | Nonthly Income                          |                         |                |                     |   |           |
|                | te monthly income as of t<br>unless you are separated.         | the date you file this form             | <b>n.</b> If you have n | othing to repo | ort for any line, v | vrite \$0 in the space. Include your non                          | -filing   |
| If you o       | , ,  |   | combine the in          | nformation for | all employers fo    | r that person on the lines below. If you                          | need      |
|                |  |   |                         | For D          | Debtor 1            | For Debtor 2 or non-filing spouse                                 |           |
|                | st monthly gross wages, sala<br>ductions.) If not paid monthly |   |                         | 2.             | \$2,364.01          |   |           |
| 3. <b>Es</b> t | timate and list monthly over                                   | rtime pay.                              |                         | 3.             | + \$0.00            |   |           |
| 4. <b>Ca</b>   | <b>Iculate gross income.</b> Add li                            | ine 2 + line 3.                         |                         | 4.             | \$2,364.01          |   |           |
|                |  |   |                         | -              |                     |   |           |

## Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 35 of 69

| Debto                 | r 1Sterling<br>First Name             |   | Martin<br>Last Name |            | Case number<br>known) |                                   |       |                         |
|-----------------------|---------------------------------------|---|---------------------|------------|-----------------------|-----------------------------------|-------|-------------------------|
|                       | 7.1017141110                          | mado name   |                     |            | For Debtor 1          | For Debtor 2 or non-filing spouse |       |                         |
| Сор                   | y line 4 here                         |   | <b>→</b> 4.         |            | \$2,364.01            |                                   |       |                         |
| 5. List               | all payroll dedu                      |   |                     |            |                       |                                   |       |                         |
| 5a.                   | Tax, Medicare,                        | and Social Security deductions  | 5a                  | L _        | \$527.19              |                                   |       |                         |
| 5b.                   | Mandatory con                         | tributions for retirement plans   | 5b                  | )          | \$0.00                |                                   |       |                         |
| 5c.                   | Voluntary contr                       | ributions for retirement plans  | 5c                  |            | \$0.00                |                                   |       |                         |
| 5d.                   | Required repay                        | ments of retirement fund loans  | 5d                  | l          | \$0.00                |                                   |       |                         |
| 5e.                   | Insurance                             |   | 5e                  |            | \$0.00                |                                   |       |                         |
| 5f. I                 | Domestic suppo                        | ort obligations   | 5f.                 |            | \$0.00                |                                   |       |                         |
| 5g.                   | Union dues                            |   | 5g                  | ـ ـ        | \$0.00                |                                   |       |                         |
| 5h.                   | Other deduction                       | ons. Specify:   | 5h                  | . + _      | \$0.00 +              |                                   |       |                         |
| 6. <b>Add</b><br>+5h. | the payroll ded                       | <b>luctions.</b> Add lines 5a + 5b + 5c + 5d + 5e +5  | f + 5g 6.           | -          | \$527.19              |                                   |       |                         |
| 7. Calc               | culate total mor                      | nthly take-home pay. Subtract line 6 from line  | e 4. 7.             | -          | \$1,836.81            |                                   |       |                         |
| 8. List               | all other incom                       | e regularly received:   |                     |            |                       |                                   |       |                         |
|                       | business, profe                       | •   |                     |            |                       |                                   |       |                         |
|                       |                                       | ent for each property and business showing<br>rdinary and necessary business expenses, and<br>y net income  | I<br>8a             |            | \$0.00                |                                   |       |                         |
|                       | Interest and div                      |   | 8b                  | -          | \$0.00                |                                   |       |                         |
| 8c.                   |                                       | payments that you, a non-filing spouse, or  |                     | -          |                       |                                   |       |                         |
|                       | Include alimony,                      | spousal support, child support, maintenance, nt, and property settlement.   | 8c                  | . <u>.</u> | \$0.00                |                                   |       |                         |
| 8d.                   | Unemployment                          | compensation  | 8d                  | ا          | \$0.00                |                                   |       |                         |
| 8e.                   | Social Security                       |   | 8e                  |            | \$0.00                |                                   |       |                         |
| <br>                  | Include cash ass<br>cash assistance t | ent assistance that you regularly receive istance and the value (if known) of any non-that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es | s<br>8f.            |            | \$0.00                |                                   |       |                         |
| 8g.                   | Pension or reti                       | rement income   | 8g                  | ı.  _      | \$0.00                |                                   |       |                         |
| 8h.                   | Other monthly                         | income. Specify:  | 8h                  | . +        | \$0.00 +              |                                   |       |                         |
| 9. <b>Add</b>         | all other incom                       | ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g -  | + 8h. 9.            |            | \$0.00                |                                   |       |                         |
|                       | •                                     | income. Add line 7 + line 9.<br>e 10 for Debtor 1 and Debtor 2 or non-filing sp   | 10<br>pouse         | ·          | \$1,836.81 +          |                                   | =     | \$1,836.81              |
| Incl<br>frier         | ude contribution<br>nds or relatives. | yular contributions to the expenses that you<br>s from an unmarried partner, members of your<br>amounts already included in lines 2-10 or amounts                                 | household, y        | your d     | ependents, your roomn |                                   |       |                         |
| Spe                   | ecify:                                |   |                     |            |                       |                                   | 11. + | \$0.00                  |
|                       |                                       | n the last column of line 10 to the amount in the Summary of Schedules and Statistical Su   |                     |            |                       |                                   | 12.   | \$1,836.81              |
|                       |                                       |   |                     |            |                       |                                   |       | Combined monthly income |
| 13. <b>Do</b>         | you expect an No.                     | increase or decrease within the year after  | you file this       | form?      |                       |                                   |       |                         |
| Ë                     | Yes. Explain:                         |   |                     |            |                       |                                   |       |                         |
| L                     | ros. Explain.                         |   |                     |            |                       |                                   |       |                         |

### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 36 of 69

| Debtor 1   Storling  |   |   | Docu                                     | ment Page 36 of 69                 | )               |                                |
|--|---|---|--|------------------------------------|-----------------|--------------------------------|
| Debtor 2   Pirst Name   Middle Name   Last Name   A supplement showing post-petition chapter 13   A supplement showing post-petition chapter 13   A supplement showing post-petition chapter 13   A supplement showing date:   MM / DD / YYYY  | Fill in this inforr                                   | mation to identify y                                      | your case:                               |                                    |                 |                                |
| United States Bankruptcy Court for the: Northern   | Debtor 2  | First Name  |  | Last Name                          |                 | a                              |
| Official Form 106J Schedule J: Your Expenses  12/18 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number if known). Answer every question.  Part 1: Describe Your Household  1. Is this a joint case?  No. Go to line 2  See. Does Debtor 2 live in a separate household?  See. Dies Debtor 2 live in a separate household?  See. Fill out this information for each dependents?  Do not list Debtor 1 and See. Fill out this information for each dependent seach seac | United States B                                       |   |  | District of Illinois               | A supplement sh | owing post-petition chapter 13 |
| Schedule J: Your Expenses  Se as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number if known). Answer every question.  Part 1: Describe Your Household  I. Is this a joint case?  No. Go to line 2  Yes. Does Debtor 2 live in a separate household?  No. Go to line 2  Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?  Do not list Debtor 1 and Debtor 2.  Child Debtor 1 or Debtor 2 age with you?  Child Search dependent investigate expenses include expenses include expenses of people other than yourself and your dependents?  Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L)  Your expenses  4. The rental or home ownership expenses for your residence. Include first mortgage payments and  |   |   |  |                                    | MM / DD / YYYY  | <u> </u>                       |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number if known. Answer every question.    Part 1:   Describe Your Household  |   |   |  |                                    |                 | 12/15                          |
| Yes. Does Debtor 2 live in a separate household?    No   | information. If r<br>(if known). Answ<br>Part 1: Desc | more space is nee<br>wer every questio<br>cribe Your Hous | eded, attach another sheet to this<br>n. |                                    |                 |                                |
| Do not list Debtor 1 and Debtor 2.  Yes. Fill out this information for Debtor 2 age with you?  Child  Do your expenses include expenses of people other than yourself and your dependents?  Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L)  Your expenses  \$955.00  |   | oes Debtor 2 live i                                       | •  | ses for Separate Household of Debt | or 2.           |                                |
| Debtor 2. each dependent Debtor 1 or Debtor 2 age with you?  Child 18 years No.  Yes.  3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 1061.)  Your expenses  \$955.00  | 2. Do you have  | dependents?   | No                                       |                                    |                 |                                |
| expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and   |   | ebtor 1 and   | <b>Y I</b>                               | Debtor 1 or Debtor 2               | age             | with you?                      |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 1061.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and  \$955.00  | expenses of<br>than<br>yourself and                   | people other  |  |                                    |                 |                                |
| expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and  \$955.00   | Part 2: Estin   | nate Your Ongo  | oing Monthly Expenses                    |                                    |                 |                                |
| such assistance and have included it on Schedule I: Your Income (Official Form B 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and  \$955.00  | expenses as o   | f a date after the  |  | •                                  | •               | -                              |
|  | •   | •   | •  | -                                  |                 | Your expenses                  |
| If not included in line 4:   | any rent fo   | r the ground or lot.                                      |  | clude first mortgage payments and  |                 | <b>\$955.00</b>                |

4a

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

\$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

## Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 37 of 69

Debtor 1 Sterling Martin Case number (if known)
First Name Middle Name Last Name

| riist Name iviiddie Name Last Name  |            |                  |
|---|------------|------------------|
|   |            | Your expenses    |
| 5. Additional mortgage payments for your residence, such as home equity loans   | 5.         | \$0.00           |
| 6. Utilities:   |            |                  |
| 6a. Electricity, heat, natural gas  | 6a.        | \$78.00          |
| 6b. Water, sewer, garbage collection  | 6b.        | \$0.00           |
| 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.        | \$0.00           |
| 6d. Other. Specify: Cellphone   | 6d         | \$25.00          |
| 7. Food and housekeeping supplies   | 7.         | \$100.00         |
| 8. Childcare and children's education costs   | 8.         | \$0.00           |
| 9. Clothing, laundry, and dry cleaning  | 9.         | \$16.00          |
| 10. Personal care products and services   | 10.        | \$15.00          |
| 11. Medical and dental expenses   | 11.        | \$10.00          |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments  | 12.        | \$45.00          |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.        | \$0.00           |
| 14. Charitable contributions and religious donations  | 14.        | \$0.00           |
| 15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.   |            |                  |
| 15a. Life insurance   | 15a        | \$0.00           |
| 15b. Health insurance   | 15b        | \$0.00           |
| 15c. Vehicle insurance  | 15c        | \$110.00         |
| 15d. Other insurance. Specify:  | 15d        | \$0.00           |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  |            |                  |
| Specify:  | 16         | \$0.00           |
| 17. Installment or lease payments:  | 10         |                  |
| 17a. Car payments for Vehicle 1   | 17a        | \$0.00           |
| 17b. Car payments for Vehicle 2   | 17b        | \$0.00           |
| 17c. Other. Specify:  | 17c        | \$0.00           |
| 17d. Other. Specify:  | 17d        | \$0.00           |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from   |            | \$0.00           |
| your pay on line 5, Schedule I, Your Income (Official Form 106I).   | 18.        |                  |
| 19.Other payments you make to support others who do not live with you.  |            |                  |
| Specify:  | 19.        | \$0.00           |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property | 20.5       | <b>#0.00</b>     |
| 20b. Real estate taxes.   | 20a<br>20b | \$0.00<br>\$0.00 |
| 20c. Property, homeowner's, or renter's insurance   | 20b        | \$0.00           |
| 20d. Maintenance, repair, and upkeep expenses.  | 20d        | \$0.00           |
| 20e. Homeowner's association or condominium dues  |            |                  |
| 200. Homoswita o association of condominant data  | 20e        | \$0.00           |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 38 of 69

| Debtor 1 Sterling      |   | Martin                     | Case number (if known) |     |            |
|------------------------|---|----------------------------|------------------------|-----|------------|
| First Name             | Middle Name   | Last Name                  |                        |     |            |
| 21. Other. Specify:    |   |                            |                        | 21  | \$0.00     |
| 22. Calculate your mor | nthly avnances  |                            |                        |     |            |
| 22a. Add lines 4 thro  | • •   |                            |                        |     | \$1,354.00 |
|                        | •   | from Official Forms 100 LO |                        |     | \$0.00     |
| , ,                    | nonthly expenses for Debtor 2), if any                                      |                            |                        |     | \$1,354.00 |
|                        | d 22b. The result is your monthly exp                                       | penses.                    |                        | 22. |            |
| 23. Calculate your mon | thly net income.  |                            |                        |     |            |
| 23a. Copy line 12 (yo  | our combined monthly income) from   | Schedule I.                |                        | 23a | \$1,836.81 |
| 23b. Copy your mon     | thly expenses from line 22 above.   |                            |                        | 23b | \$1,354.00 |
| ,                      | onthly expenses from your monthly   | income.                    |                        |     | \$482.81   |
| The result is you      | ur monthly net income.  |                            |                        | 23c | ·          |
|                        | u expect to finish paying for your car to increase or decrease because of a |                            |                        |     |            |

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 39 of 69

| Fill in this infor        | mation to identify your ca | ase:        |                      |          |
|---------------------------|----------------------------|-------------|----------------------|----------|
| Debtor 1                  | Sterling                   |             | Martin               |          |
|                           | First Name                 | Middle Name | Last Name            |          |
| Debtor 2                  |                            |             |                      |          |
| (Spouse, if filing)       | First Name                 | Middle Name | Last Name            |          |
| United States E           | Sankruptcy Court for the:  | Northern    | District of Illinois |          |
| Case number<br>(If known) | -                          |             | (State)              | <u> </u> |

#### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below   |   |  |  |  |  |  |  |  |
|-----|---|---|--|--|--|--|--|--|--|
|     | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |   |  |  |  |  |  |  |  |
|     | ▼ No  |   |  |  |  |  |  |  |  |
|     | Yes. Name of person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |  |  |  |
|     |   |   |  |  |  |  |  |  |  |
|     |   |   |  |  |  |  |  |  |  |
|     | Under penalty of perjury, I declare that I have read the summary                                  | and schedules filed with this declaration and   |  |  |  |  |  |  |  |
|     | that they are true and correct.   |   |  |  |  |  |  |  |  |
| ×   | /s/ Sterling Martin   | ×   |  |  |  |  |  |  |  |
|     | Signature of Debtor 1   | Signature of Debtor 2   |  |  |  |  |  |  |  |
|     | Date <b>2/8/2018</b>  | Date  |  |  |  |  |  |  |  |
|     | MM/DD/YYYY  | MM/DD/YYYY  |  |  |  |  |  |  |  |

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 40 of 69

| Fill in this            | s inform         | nation to identify your c    | ase:                |  |                   |                   |          |                      |
|-------------------------|------------------|------------------------------|---------------------|--|-------------------|-------------------|----------|----------------------|
| Debtor 1                |                  | Sterling<br>First Name       | Middle N            | Martin<br>Iame Last Nam  | e                 |                   |          |                      |
| Debtor 2<br>(Spouse, if |                  | First Name                   | Middle N            | Jame Last Nam  | e                 |                   |          |                      |
| United St               | tates Ba         | nkruptcy Court for the:      | Northern            | District of Illino   | is                |                   |          |                      |
| Case nur                | mber             |                              |                     | (Stat  | e)                |                   |          |                      |
| (If known)              |                  |                              |                     |  |                   |                   |          | Check if this is ar  |
| Offic                   | ial F            | orm 107                      |                     |  |                   |                   |          | amended filing       |
| State                   | men              | t of Financia                | l Affairs f         | or Individuals   | Filing for        | Bankru            | ıptcy    | 04/16                |
| informat                | ion. If          |                              | d, attach a sepa    | arried people are filing<br>arate sheet to this form                             |                   |                   |          |                      |
| Part 1:                 | Give I           | Details About Your           | Marital Status      | and Where You Lived  | Before            |                   |          |                      |
| 1. W                    | hat is ye        | our current marital sta      | itus?               |  |                   |                   |          |                      |
|                         | Marri<br>Not n   | ied<br>narried               |                     |  |                   |                   |          |                      |
| 2. Du                   | iring th         | e last 3 years, have yo      | u lived anywhere    | other than where you li  | ve now?           |                   |          |                      |
| <b>□</b>                | No<br>Yes.       |                              | u lived in the last | 3 years. Do not include v  | where you live no | w.                |          | Dates Debtor 2 lived |
|                         | Debt             | or i.                        |                     | there  | Deptor 2.         |                   |          | there                |
|                         |                  |                              |                     |  | Same as I         | Debtor 1          |          | Same as Debtor 1     |
|                         |                  | Stoneybrook Ln<br>per Street |                     | From 01/2013 To 11/2017  | Number Stree      | t                 |          | From                 |
|                         | Auror            | a Illinois                   | 60504               |  |                   |                   |          |                      |
|                         | City             | State                        | Zip Code            |  | City Same as I    | State<br>Debtor 1 | Zip Code | Same as Debtor 1     |
|                         | Numl             | oer Street                   |                     | From   | Number Stree      | i                 |          | From                 |
|                         | City             | State                        | Zip Code            |  | City              | State             | Zip Code |                      |
| and                     | territorie<br>No | es include Arizona, Califo   | mia, Idaho, Louis   | ouse or legal equivalent<br>iana, Nevada, New Mexico<br>Codebtors (Official Form | Puerto Rico, Texa |                   |          |                      |

### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 41 of 69

Case number (if known)

Martin

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$3317.91 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$33735.79 For last calendar year: commissions, commissions, 2017 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$26017.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2016) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2017 For the calendar year before that: (January 1 to December 31, 2016

Debtor 1 Sterling

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Page 42 of 69 Document

Martin

Debtor 1 Sterling \_\_ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 43 of 69

| or 1             | Sterling                                |   |  |  | artin  | Case number                                  | (if known)  |
|------------------|---|---|--|--|--|--|---|
|                  | First Name                              |   | Middle Name  | La                                       | st Name  |  |   |
| nsi<br>orp<br>ge | ders include your<br>porations of which | relatives; and the relatives; are relatives; and the relatives; and the relatives; are relatives; and the relatives; are relatives; and the relatives; and the relatives; are relatives; and the relatives; are relatives; and the relatives; and the relatives; are relatives; are relatives; are relatives; and the relatives; are relatives; are relatives; and the relatives; are relatives; | any general partner<br>an officer, director,<br>ness you operate a | s; relatives of any<br>person in control | general partners; part<br>, or owner of 20% or | tnerships of which y<br>more of their voting | who was an insider? /ou are a general partner; g securities; and any managing r domestic support obligations, |
| <b>✓</b>         | No                                      |   |  |  |  |  |   |
|                  | Yes. List all pay                       | ments to  | an insider.  | Dates of                                 | Total amount                                   | Amount you                                   | Reason for this payment   |
|                  |   |   |  | payment                                  | paid   | still owe                                    | neason for this payment   |
|                  | Insider's Name                          |   |  |  |  |  |   |
|                  | Number Street                           |   |  |  |  |  |   |
|                  | City                                    | State   | Zip Code   |  |  |  |   |
|                  | Insider's Name                          |   |  |  |  |  |   |
|                  | Number Street                           |   |  |  |  |  |   |
|                  |   |   |  |  |  |  |   |
|                  | City                                    | State   | Zip Code   |  |  |  |   |
|                  | No                                      |   | aranteed or cosigne<br>at benefited an ins                         | ·  | Total amount paid                              | Amount you still owe                         | Reason for this payment  Include creditor's name  |
|                  | Insider's Name                          |   |  |  |  |  |   |
|                  | Number Street                           |   |  |  |  |  |   |
|                  | City                                    | State   | Zip Code   |  |  |  |   |
|                  | Insider's Name                          |   |  |  | <u> </u>                                       |  |   |
|                  | Number Street                           |   |  |  |  |  |   |
|                  |   |   |  |  |  |  |   |
|                  | City                                    | State   | Zip Code   |  |  |  |   |

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Page 44 of 69 Document

Martin

Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Court or agency Status of the case Nature of the case Case title Past due amount on bike Kane County Circuit Court Pending One Main Financial of IL vs Sterling Court Name Martin On appeal NumberStreet Concluded Case number 17-sc-4626 City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

Debtor 1 Sterling

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 45 of 69

| Debt | tor 1    | Sterling              |  | Martin                     | Case number (if known)                 |                    |                   |
|------|----------|-----------------------|--|----------------------------|--|--------------------|-------------------|
|      |          | First Name            | Middle Name  | Last Name                  |  |                    |                   |
| 11.  |          |                       | you filed for bankruptcy, did a<br>make a payment because you      |                            | eank or financial institution, set off | f any amoun        | ts from your      |
|      | <b>✓</b> | No                    |  |                            |  |                    |                   |
|      |          | Yes. Fill in the deta | ails.  |                            |  |                    |                   |
|      |          |                       |  | Describe the action th     |  | e action<br>staken | Amount            |
|      |          | Creditor's Name       |  |                            |  |                    |                   |
|      |          |                       |  |                            |  |                    |                   |
|      |          | Number Street         |  |                            |  |                    |                   |
|      |          |                       |  | Last 4 digits of account   | number: XXXX-                          |                    |                   |
|      |          |                       |  |                            |  |                    |                   |
|      |          | City                  | State Zip Code   |                            |  |                    |                   |
| 12.  |          |                       | ou filed for bankruptcy, was an<br>custodian, or another official? | y of your property in the  | possession of an assignee for the b    | benefit of cr      | editors, a court- |
|      | <b>V</b> | No                    |  |                            |  |                    |                   |
|      | Ī        | Yes                   |  |                            |  |                    |                   |
| Part | 5:       | List Certain Gifts    | and Contributions  |                            |  |                    |                   |
| 13.  | Wi       | ithin 2 years before  | you filed for bankruptcy, did y                                    | ou give any gifts with a t | otal value of more than \$600 per p    | nerson?            |                   |
|      |          | 7 N                   | , ouou .o. uu up.o,, u.u ,   | ou go u, go u .            | очи тапао от того тап фосо рог р       |                    |                   |
|      | ¥        |                       | aila far agab aift   |                            |  |                    |                   |
|      | L        | Yes. Fill in the det  | value of more than \$600   | Describe the gifts         | Dota                                   | es you             | Value             |
|      |          | per person            | value of more than \$000   | Describe the girts         |  | e the              | value             |
|      |          |                       |  |                            | •                                      |                    |                   |
|      |          | Person to Whom Yo     | ou Gave the Gift   |                            |  |                    |                   |
|      |          |                       |  |                            |  |                    |                   |
|      |          | Number Street         |  |                            |  |                    |                   |
|      |          |                       |  |                            |  |                    |                   |
|      |          | City                  | State Zip Code   |                            |  |                    |                   |
|      |          | Person's relationshi  | p to you   |                            |  |                    |                   |
|      |          |                       |  |                            |  |                    |                   |
|      |          | Person to Whom Yo     | ou Gave the Gift   |                            |  |                    |                   |
|      |          |                       |  |                            |  |                    |                   |
|      |          | Number Street         |  |                            |  |                    |                   |
|      |          |                       |  |                            |  |                    |                   |
|      |          | •                     | State Zip Code   |                            |  |                    |                   |
|      |          | Person's relationshi  | p to you   |                            |  |                    |                   |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 46 of 69

| ebtor 1 | Sterling   |  | Martin Case numb  | ber <i>(if known)</i>                       |                         |
|---------|--|--|---|---|-------------------------|
|         | First Name   | Middle Name  | Last Name   | · /   |                         |
|         |  |  |   |   |                         |
| . Wi    | thin 2 years before you file   | d for bankruptcy, did  | you give any gifts or contributions with a total  | al value of more than \$6                   | 600 to any charity?     |
|         | <b>N</b> o   |  |   |   |                         |
|         |  |  |   |   |                         |
|         | Yes. Fill in the details for   | each gift or contribution  | on.   |   |                         |
|         | Gifts or contributions to  | charities  | Describe what you contributed   | Date you                                    | Value                   |
|         | that total more than \$60  |  | 200000  | contributed                                 |                         |
|         | •  |  |   |   |                         |
|         |  |  |   |   | _                       |
|         | Charity's Name   |  |   |   |                         |
|         |  |  |   |   |                         |
|         |  |  |   |   |                         |
|         | Number Street  |  | •   |   |                         |
|         |  |  |   |   |                         |
|         | City State   | Zip Code   | •   |   |                         |
|         | _  | •  |   |   |                         |
| rt 6:   | List Certain Losses  |  |   |   |                         |
| gai     | mbling?<br>  No<br>  Yes. Fill in the details.   |  |   |   |                         |
|         | Describe the property yo   | u lost and   | Describe any insurance coverage for the   | loss Date of you                            | r Value of property     |
|         | how the loss occurred  |  | Include the amount that insurance has paid.   |   | lost                    |
|         |  |  | pending insurance claims on line 33 of Sche   | edule                                       |                         |
|         |  |  | A/B: Property.  |   |                         |
|         |  |  |   |   |                         |
|         |  |  |   |   |                         |
|         |  |  |   |   |                         |
| . Wit   | out seeking bankruptcy or  | for bankruptcy, did y<br>preparing a bankrupt  |   |   | to anyone you consulted |
| i. Wit  | thin 1 year before you filed<br>out seeking bankruptcy or<br>dude any attorneys, bankrupt<br>No  | for bankruptcy, did y<br>preparing a bankrupt  |   |   | to anyone you consulted |
| . Wit   | thin 1 year before you filed<br>out seeking bankruptcy or<br>lude any attorneys, bankrupt  | for bankruptcy, did y<br>preparing a bankrupt  | ccy petition?<br>r credit counseling agencies for services required i                                     | in your bankruptcy.                         |                         |
| . Wit   | thin 1 year before you filed<br>out seeking bankruptcy or<br>dude any attorneys, bankrupt<br>No  | for bankruptcy, did y<br>preparing a bankrupt  | ccy petition? r credit counseling agencies for services required i  Description and value of any property | in your bankruptcy.  Date payme             | ent Amount of           |
| . Wit   | thin 1 year before you filed<br>out seeking bankruptcy or<br>dude any attorneys, bankrupt<br>No  | for bankruptcy, did y<br>preparing a bankrupt  | ccy petition?<br>r credit counseling agencies for services required i                                     | in your bankruptcy.  Date payme or transfer |                         |
| . Wit   | thin 1 year before you filed<br>out seeking bankruptcy or<br>dude any attorneys, bankrupt<br>No  | for bankruptcy, did y<br>preparing a bankrupt  | ccy petition? r credit counseling agencies for services required i  Description and value of any property | in your bankruptcy.  Date payme             | ent Amount of           |
| . Wit   | thin 1 year before you filed<br>out seeking bankruptcy or<br>lude any attorneys, bankrupt<br>No<br>Yes. Fill in the details.   | for bankruptcy, did y<br>preparing a bankrupt  | ccy petition? r credit counseling agencies for services required i  Description and value of any property | in your bankruptcy.  Date payme or transfer | ent Amount of           |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid   | for bankruptcy, did y<br>preparing a bankrupt<br>cy petition preparers, or   | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme<br>or transfer<br>was made       | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu  | for bankruptcy, did y<br>preparing a bankrupt<br>cy petition preparers, or   | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme<br>or transfer<br>was made       | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid   | for bankruptcy, did y<br>preparing a bankrupt<br>cy petition preparers, or   | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme<br>or transfer<br>was made       | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenual  | for bankruptcy, did y<br>preparing a bankrupt<br>cy petition preparers, or   | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme<br>or transfer<br>was made       | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300  | for bankruptcy, did y preparing a bankrupt cy petition preparers, or   | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme<br>or transfer<br>was made       | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois  | for bankruptcy, did y preparing a bankrupt cy petition preparers, or use   | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300  | for bankruptcy, did y preparing a bankrupt cy petition preparers, or   | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300  Aurora Illinois City State  | for bankruptcy, did y preparing a bankrupt cy petition preparers, or use   | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois  | for bankruptcy, did y preparing a bankrupt cy petition preparers, or use   | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address  | for bankruptcy, did y preparing a bankrupt cy petition preparers, or preparers, or preparers and preparers are considered as a second con | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300  Aurora Illinois City State  | for bankruptcy, did y preparing a bankrupt cy petition preparers, or preparers, or preparers and preparers are considered as a second con | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300  Aurora Illinois City State  Email or website address  Person Who Made the Pay                                | for bankruptcy, did y preparing a bankrupt cy petition preparers, or preparers, or preparers and preparers are considered as a second con | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| i. Wit  | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address  | for bankruptcy, did y preparing a bankrupt cy petition preparers, or preparers, or preparers and preparers are considered as a second con | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| i. Wit  | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid               | for bankruptcy, did y preparing a bankrupt cy petition preparers, or preparers, or preparers and preparers are considered as a second con | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| i. Wit  | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300  Aurora Illinois City State  Email or website address  Person Who Made the Pay                                | for bankruptcy, did y preparing a bankrupt cy petition preparers, or preparers, or preparers and preparers are considered as a second considered considered as a second considered as a second considered as a | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| i. Wit  | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid               | for bankruptcy, did y preparing a bankrupt cy petition preparers, or preparers, or preparers and preparers are considered as a second considered considered as a second considered as a second considered as a | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| i. Wit  | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid               | for bankruptcy, did y preparing a bankrupt cy petition preparers, or preparers, or preparers and preparers are considered as a second considered considered as a second considered as a second considered as a | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| i. Wit  | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid Number Street | for bankruptcy, did y preparing a bankrupt cy petition preparers, or determined by the second | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid               | for bankruptcy, did y preparing a bankrupt cy petition preparers, or preparers, or preparers and preparers are considered as a second considered considered as a second considered as a second considered as a | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| i. Wit  | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid Number Street | for bankruptcy, did y preparing a bankrupt cy petition preparers, or determined by the second | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| i. Wit  | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid Number Street | for bankruptcy, did y preparing a bankrupt cy petition preparers, or determined by the second | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |
| . Wit   | thin 1 year before you filed out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid Number Street | for bankruptcy, did y preparing a bankrupt cy petition preparers, or determined by the second | r credit counseling agencies for services required in Description and value of any property transferred   | Date payme or transfer was made             | ent Amount of payment   |

### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 47 of 69

| 1 Sterling  |  | Martin   | Case r   | number <i>(if known)</i>  |  |            |   |
|---|--|--|--|---|--|------------|---|
| First Name M  | iddle Name   | Last Name  |  |   |  |            |   |
| elp you deal with your creditors or                                       | to make payme  | ents to your creditors?  | ır behalf p  | oay or transfer   | any property to a  | anyone     | who promised to   |
| No Yes. Fill in the details.  |  |  |  |   |  |            |   |
| -   |  | Description and value of an transferred  | y property   | <b>y</b>  | Date<br>payment or<br>transfer was<br>made   | Amou       | nt of payment   |
| Person Who Was Paid   |  |  |  |   |  |            |   |
| Number Street   |  |  |  |   |  |            |   |
| Cit. Chata  | 7in Code   |  |  |   |  |            |   |
| City State  | Zip Code   |  |  |   |  |            |   |
| e ordinary course of your business clude both outright transfers and tran | s or financial af  | fairs?<br>ecurity (such as the granting of a   | _  |   |  |            |   |
| No Yes. Fill in the details.  |  |  |  |   |  |            |   |
| •   |  | Description and value of pr transferred  | operty   |   |  | paid       | Date<br>transfer was<br>made  |
| Person Who Received Transfer  |  |  |  |   |  |            |   |
| Number Street   |  |  |  |   |  |            |   |
| City State<br>Person's relationship to you                                | Zip Code   |  |  |   |  |            |   |
| Person Who Received Transfer  |  |  |  |   |  |            |   |
| Number Street   |  |  |  |   |  |            |   |
| City State<br>Person's relationship to you                                | Zip Code   |  |  |   |  |            |   |
| eneficiary?   |  | you transfer any property to a   | self-settle  | ed trust or sim   | lar device of wh   | ch you     | are a   |
| No Yes. Fill in the details.  |  |  |  |   |  |            |   |
| _   |  | Description and value of t   | he proper  | ty transferred  |  |            | Date<br>transfer was<br>made  |
| Name of trust   |  |  |  |   |  |            |   |
|   | thin 1 year before you filed for ba Ip you deal with your creditors or In not include any payment or transfer  No Yes. Fill in the details.  Person Who Was Paid  Number Street  City State  thin 2 years before you filed for be the ordinary course of your business blude both outright transfers and transfers that you have already listed  No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State Person's relationship to you  Person Who Received Transfer  Number Street  City State Person's relationship to you  thin 10 years before you filed for Ineficiary? The see are often called asset-protection No Yes. Fill in the details. | thin 1 year before you filed for bankruptcy, did ye pou deal with your creditors or to make payment on tinclude any payment or transfer that you listed of the pound of the payment of transfer that you listed of the pound of the payment of transfer that you listed of the payment of transfer that you listed of the payment of transfer that you listed of the payment of transfer that you have already listed on this statem of the payment of transfers and transfers made as a distransfers that you have already listed on this statem of the payment of transfer that you have already listed on this statem of the payment of transfer that you have already listed on this statem of the payment of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you have already listed on this statem of transfer that you listed to be removed that you listed to be remov | thin 1 year before you filed for bankruptcy, did you or anyone else acting on you be you deal with your creditors or to make payments to your creditors? not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.  Person Who Was Paid  Number Street  City State Zip Code  City State Joe Code  Person Who Haceeived Transfer  Number Street  Description and value of an transfers that you have already listed on this statement.  No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State Zip Code  Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code  Person's relationship to you  Person's relationship to you  thin 10 years before you filed for bankruptcy, did you transfer any property to a neficiary?  nese are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of transfer and the property of the | thin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf p you deal with your creditors or to make payments to your creditors? not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.  Description and value of any property transferred  Person Who Was Paid  Number Street  City State Zip Code  thin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any experiency course of your business or financial affairs?  Loude both outright transfers and transfers made as security (such as the granting of a security into did ransfers that you have already listed on this statement.  No Yes. Fill in the details.  Description and value of property transferred  Person Who Received Transfer  Number Street  City State Zip Code  Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code  Person's relationship to you filed for bankruptcy, did you transfer any property to a self-settle neficiary?  rese are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property to a self-settle neficiary?  rese are often called asset-protection devices.)  Description and value of the property to a self-settle neficiary? | thin tyear before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer in you deal with your creditors or to make payments to your creditors?  I No I Yes. Fill in the details.  Description and value of any property transfer any property to a self-settled trust or simination?  Person Who Was Paid  Number Street  Dity State Zip Code  thin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to an experiment of transfers that you have already listed on this statement.  No I Yes. Fill in the details.  Description and value of property interest or mortgal of transfers that you have already listed on this statement.  Description and value of property  Description and value of property  Person Who Received Transfer  Number Street  Description and value of property  Description and value of property transfer any property to a self-settled trust or simination?  Description and value of the property transferred  Description and value of the property transferred | First Name | First Name  Lat Hame  Lat |

### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 48 of 69

Martin Debtor 1 Sterling Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 49 of 69

| Port   October   Description   Made Name   Law Name     | Deb  |                     | Sterling  |               | /lartin         | Case               | e number (if known)                       |           |
|--|------|---------------------|---|---------------|-----------------|--------------------|---|-----------|
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.    No   |      |                     |   |               |                 |                    |   |           |
| Someone   Some   | Part | 9:                  | dentify Property You Hold or Control f            | or Someor     | ne Else         |                    |   |           |
| Where is the property?    Owner's Name   | 23.  | _                   |   | ne else owns  | s? Include any  | / property you be  | orrowed from, are storing for, or hold in | trust for |
| Where is the property?    Owner's Name   |      |                     |   |               |                 |                    |   |           |
| Where is the property?   |      | $ldsymbol{\square}$ |   |               |                 |                    |   |           |
| Number Street  |      |                     | Yes. Fill in the details.                         |               |                 |                    |   |           |
| Number Street  |      |                     |   | Where is t    | he property?    |                    | Describe the contents                     | Value     |
| Number Street  |      |                     |   |               |                 |                    |   |           |
| City   State   Zip Code  |      |                     | Owner's Name                                      | NumberSt      | reet            |                    |   |           |
| City   State   Zip Code  |      |                     | Ni. wash au Ohua ah                               |               |                 |                    |   |           |
| Part 10  Give Details About Environmental Information  |      |                     | Number Street                                     |               |                 |                    |   |           |
| Part 10  Give Details About Environmental Information  |      |                     |   | City          | State           | Zin Code           |   |           |
| Part 10: Give Details About Environmental Information  For the purpose of Part 10, the following definitions apply:  * Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  * Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  * Hazardous material mean anything an environmental law, defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No  |      |                     |   | Oity          | Otato           | Zip Code           |   |           |
| For the purpose of Part 10, the following definitions apply:  * Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  * Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it. Including disposal sites.  * Hazardous material mans anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No  |      |                     | City State Zip Code                               |               |                 |                    |   |           |
| For the purpose of Part 10, the following definitions apply:  * Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  * Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it. Including disposal sites.  * Hazardous material mans anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No  |      |                     | 0: D-t-: - Abt-F:                                 |               |                 |                    |   |           |
| Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.   **Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it o     | Part | 10:                 | Give Details About Environmental Into             | ormation      |                 |                    |   |           |
| Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.   **Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it o     | For  | the p               | urpose of Part 10, the following definitions appl | v:            |                 |                    |   |           |
| hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controling the cleanup of these substances, wastes, or material.  • Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  • Hazardous material/means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No  |      | -                   |   | -             |                 |                    |   |           |
| including statutes or regulations controlling the cleanup of these substances, wastes, or material.  *** Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  *** Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  **Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  **24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  **Yes. Fill in the details.**  **Governmental unit**  **Qovernmental unit**  **Name of site**  **Number Street**  **Oity**  **State**  **Zip Code**  **Qovernmental unit**  **Pair in the details.**  **Qovernmental unit**  **Qovernmental unit**  **Pair of site**  **Number Street**  ** |      |                     |   |               |                 |                    |   |           |
| or used to own, operate, or utilize it, including disposal sites.  In Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No Yes. Fill in the details.  Governmental unit  Number Street  City State Zip Code  25. Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  notice  Date of notice  Octive State Zip Code  City State Zip Code  City State Zip Code  City State Zip Code  Date of notice  Number Street  Number Street  Number Street  Number Street  Number Street  Number Street  Zip Code  |      |                     |   |               |                 |                    |   |           |
| or used to own, operate, or utilize it, including disposal sites.  In Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No Yes. Fill in the details.  Governmental unit  Number Street  City State Zip Code  25. Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  notice  Date of notice  Octive State Zip Code  City State Zip Code  City State Zip Code  City State Zip Code  Date of notice  Number Street  Number Street  Number Street  Number Street  Number Street  Number Street  Zip Code  |      |                     |   |               |                 |                    |   |           |
| Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No   |      |                     |   |               | ily environmen  | italiaw, whether y | ou now own, operate, or utilize it        |           |
| Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No   |      | _ ,,                |   |               |                 |                    | days ayladanaa                            |           |
| Preport all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No  |      |                     |   |               |                 | ious waste, nazar  | dous substance,                           |           |
| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No   |      |                     |   |               |                 |                    |   |           |
| No   Yes. Fill in the details.   Governmental unit   Environmental law, if you know it   Date of notice  | Rep  | ort all             | notices, releases, and proceedings that you know  | ow about, reg | gardless of whe | en they occurred.  |   |           |
| No   Yes. Fill in the details.   Governmental unit   Environmental law, if you know it   Date of notice  |      |                     |   |               |                 |                    |   |           |
| Yes. Fill in the details.   Governmental unit   Environmental law, if you know it   Date of notice   | 24.  | Has                 | any governmental unit notified you that you       | ı may be liab | le or potentia  | illy liable under  | or in violation of an environmental law?  |           |
| Yes. Fill in the details.   Governmental unit   Environmental law, if you know it   Date of notice   |      | ./                  | No  |               |                 |                    |   |           |
| Name of site   Governmental unit   Environmental law, if you know it   Date of notice  |      | Ħ                   | Yes Fill in the details                           |               |                 |                    |   |           |
| Name of site  Number Street  Number Street  City State Zip Code  25. Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Governmental unit  Finvironmental law, if you know it  Name of site  Number Street  Number Street  Number Street  City State Zip Code   |      | ш                   | 100. Till it die Gottalie.                        | C             | man             |                    | Environmental law if you know it          | Doto of   |
| Name of site   Number Street   Number Street   |      |                     |   | Governme      | ntai unit       |                    | Environmental law, if you know it         |           |
| Number Street  City State Zip Code  25. Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Finvironmental law, if you know it  Name of site  Number Street  Number Street  City State Zip Code  |      |                     |   |               |                 |                    |   |           |
| City State Zip Code  City State Zip Code  25. Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Finvironmental law, if you know it Name of site Number Street Number Street City State Zip Code  |      |                     | Name of site                                      | Governme      | ntal unit       | -                  |   |           |
| City State Zip Code  City State Zip Code  25. Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Finvironmental law, if you know it Name of site Number Street Number Street City State Zip Code  |      |                     | <u> </u>  |               |                 |                    |   |           |
| 25. Have you notified any governmental unit of any release of hazardous material?    No  |      |                     | Number Street                                     | NumberStr     | eet             |                    |   |           |
| 25. Have you notified any governmental unit of any release of hazardous material?    No  |      |                     |   | City          | Stata           | Zin Codo           |   |           |
| 25. Have you notified any governmental unit of any release of hazardous material?    No  |      |                     |   | City          | State           | Zip Code           |   |           |
| Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  Name of site  Number Street  Number Street  City State Zip Code   |      |                     | City State Zip Code                               |               |                 |                    |   |           |
| Ves. Fill in the details.  Governmental unit  Environmental law, if you know it  Name of site  Number Street  Number Street  City State Zip Code   |      |                     |   |               |                 |                    |   |           |
| Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  Name of site  Number Street  Number Street  City State Zip Code   | 25.  | Hav                 | e you notified any governmental unit of any       | release of ha | azardous mate   | erial?             |   |           |
| Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  Name of site  Number Street  Number Street  City State Zip Code   |      |                     | No  |               |                 |                    |   |           |
| Name of site  Number Street  City State Zip Code    Covernmental unit   Covernmental law, if you know it notice   Covernmental unit  |      | H                   |   |               |                 |                    |   |           |
| Name of site  Governmental unit  Number Street  City State Zip Code  |      | ш                   | roo. I iii ii i die detaile.                      | 0             |                 |                    | E   | D.1       |
| Name of site    Governmental unit  |      |                     |   | Governme      | ental unit      |                    | Environmental law, if you know it         |           |
| Number Street  City State Zip Code   |      |                     |   |               |                 |                    |   | 1101100   |
| City State Zip Code  |      |                     | Name of site                                      | Governme      | ntal unit       | _                  |   |           |
| City State Zip Code  |      |                     |   |               |                 |                    |   |           |
|  |      |                     | Number Street                                     | NumberStr     | eet             |                    |   |           |
|  |      |                     |   | 0.1           | 0: :            | 7:- 0 -            |   |           |
| City State Zip Code  |      |                     |   | City          | State           | ∠ıp Code           |   |           |
|  |      |                     | City State Zip Code                               |               |                 |                    |   |           |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 50 of 69

| Deb  |       | Sterling             |                  |                    | Martin              | C                      | ase number <i>(i</i>        | f known)       |                           |                    |
|------|-------|----------------------|------------------|--------------------|---------------------|------------------------|-----------------------------|----------------|---------------------------|--------------------|
|      |       | First Name           |                  | Middle Name        | Last Name           |                        |                             |                |                           |                    |
| 26.  | Hav   | e you been a part    | y in any judio   | cial or administr  | rative proceeding   | under any environm     | ental law? Ir               | nclude settlem | nents and orde            | rs.                |
|      | H     | Yes. Fill in the det | taile            |                    |                     |                        |                             |                |                           |                    |
|      | Ш     | 165.1                | ialis.           |                    | -                   |                        |                             |                |                           |                    |
|      |       |                      |                  |                    | Court or agency     |                        | Nature                      | of the case    |                           | Status of the case |
|      |       | Case title           |                  |                    |                     |                        |                             |                |                           | Case               |
|      |       | Case title           |                  |                    |                     |                        |                             |                |                           | Pending            |
|      |       |                      |                  |                    | Court Name          |                        | _                           |                |                           |                    |
|      |       |                      |                  |                    | Ni b. a Ot a.t      |                        | _                           |                |                           | On appeal          |
|      |       | Case number          |                  |                    | NumberStreet        |                        |                             |                |                           |                    |
|      |       |                      |                  |                    | City Sta            | ate Zip Code           | _                           |                |                           | Concluded          |
|      |       |                      |                  |                    | Oily Sta            | ite Zip Code           |                             |                |                           |                    |
| Part | t 11: | Give Details Al      | oout Your E      | Business or Co     | onnections to Ar    | ny Business            |                             |                |                           |                    |
|      |       |                      |                  |                    |                     | •                      |                             |                |                           |                    |
| 27.  | With  | nin 4 years before   | you filed for    | bankruptcy, did    | l you own a busine  | ess or have any of th  | e following o               | onnections to  | any business?             | ?                  |
|      |       | -                    |                  |                    |                     | -                      |                             |                | -                         |                    |
|      |       | A sole propri        | etor or self-e   | mployed in a tra   | ade, profession, or | other activity, either | r full-time or <sub>l</sub> | part-time      |                           |                    |
|      |       | A member of          | f a limited liab | oility company (L  | LC) or limited liab | ility partnership (LLP | P)                          |                |                           |                    |
|      |       | A partner in a       |                  |                    | ,                   | , , , , ,              | ,                           |                |                           |                    |
|      |       |                      | -                |                    |                     |                        |                             |                |                           |                    |
|      |       |                      |                  |                    | e of a corporation  |                        |                             |                |                           |                    |
|      |       | An owner of          | at least 5% c    | of the voting or e | quity securities of | a corporation          |                             |                |                           |                    |
|      |       |                      |                  | 0 . 5 . 10         |                     |                        |                             |                |                           |                    |
|      | ✓     | No. None of the a    |                  |                    |                     |                        |                             |                |                           |                    |
|      |       | Yes. Check all the   | at apply abo     | ve and fill in the | details below for e | each business.         |                             |                |                           |                    |
|      |       |                      |                  |                    | Describe the        | e nature of the busi   | ness                        | Employer Id    | dentification nu          | umber Do not       |
|      |       |                      |                  |                    |                     |                        |                             | include Soc    | ial Security nι           | ımber or ITIN.     |
|      |       |                      |                  |                    |                     |                        |                             | EIN:           |                           |                    |
|      |       | Business Name        |                  |                    |                     |                        |                             | 2              |                           |                    |
|      |       |                      |                  |                    | _                   |                        |                             |                |                           |                    |
|      |       | Number Street        |                  |                    |                     |                        |                             | Dates busin    | ness existed              |                    |
|      |       |                      |                  |                    | Name of acc         | countant or bookkee    | eper                        |                |                           |                    |
|      |       | City                 | State            | Zip Code           |                     |                        |                             | From           | To                        |                    |
|      |       |                      |                  |                    |                     |                        |                             |                |                           |                    |
|      |       |                      |                  |                    |                     |                        |                             |                |                           |                    |
|      |       |                      |                  |                    |                     |                        |                             |                |                           |                    |
|      |       |                      |                  |                    | Describe the        | e nature of the busi   | ness                        | Employer Id    | dentification nu          | umber Do not       |
|      |       |                      |                  |                    |                     |                        |                             | include Soc    | ial Security nu           | ımber or ITIN.     |
|      |       | -                    |                  |                    |                     |                        |                             | EIN:           |                           |                    |
|      |       | Business Name        |                  |                    |                     |                        |                             |                |                           |                    |
|      |       |                      |                  |                    | _                   |                        |                             | 5.1.           |                           |                    |
|      |       | Number Street        |                  |                    |                     |                        |                             | Dates busin    | ness existed              |                    |
|      |       | -                    |                  |                    | Name of acc         | countant or bookkee    | eper                        |                |                           |                    |
|      |       | City                 | State            | Zip Code           |                     |                        |                             | From           | To                        |                    |
|      |       |                      |                  |                    |                     |                        |                             |                |                           |                    |
|      |       |                      |                  |                    |                     |                        |                             |                |                           |                    |
|      |       |                      |                  |                    |                     |                        |                             |                |                           |                    |
|      |       |                      |                  |                    | Describe the        | e nature of the busin  | ness                        | Employer Id    | dentification nu          | umber Do not       |
|      |       |                      |                  |                    |                     |                        |                             |                | ial Security nu           |                    |
|      |       |                      |                  |                    |                     |                        |                             | EIN:           |                           |                    |
|      |       | Business Name        |                  |                    | _                   |                        |                             | LIIV.          |                           |                    |
|      |       |                      |                  |                    |                     |                        |                             |                |                           |                    |
|      |       | Number Street        |                  |                    |                     |                        |                             | Dates busin    | ness existed              |                    |
|      |       |                      |                  |                    | Name of acc         | countant or bookkee    | eper                        |                |                           |                    |
|      |       | City                 | State            | Zip Code           |                     |                        |                             | From           | То                        |                    |
|      |       |                      |                  |                    |                     |                        |                             | -              | <del></del> · <del></del> |                    |
|      |       |                      |                  |                    |                     |                        |                             |                |                           |                    |
|      |       |                      |                  |                    |                     |                        |                             |                |                           |                    |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 51 of 69

| Deb | otor 1 | Sterling  |   | Martin                       | Case number (if known)  |
|-----|--------|---|---|------------------------------|---|
|     |        | First Name  | Middle Name   | Last Name                    |   |
| 28. |        | nin 2 years before you fi<br>ditors, or other parties.<br>No<br>Yes. Fill in the details be |   | give a financial statement t | o anyone about your business? Include all financial institutions,   |
|     |        |   |   | Date issued                  |   |
|     |        | Nama  |   | MM/DD/YYYY                   |   |
|     |        | Name  |   | WINN, DD, TTTT               |   |
|     |        | Number Street   |   |                              |   |
|     |        | -   |   |                              |   |
|     |        | City Sta  | te Zip Code   |                              |   |
| Par | t 12:  | Sign Below  |   |                              |   |
|     | true a | ınd correct. I understan  | nd that making a false stater<br>t in fines up to \$250,000, or | nent, concealing property,   | s, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|     |        | Signature of  | <u> </u>  |                              | Signature of Debtor 2   |
|     |        | Date 2/8/20   | 018   |                              | Date  |
|     | Did yo | ou attach additional par<br>lo<br>es<br>ou pay or agree to pay s                            |   |                              | s Filing for Bankruptcy (Official Form 107)?  cruptcy forms?  Attach the Bankruptcy Petition Preparer's Notice,   |
|     | ш'     | co. Harrie or person  |   |                              | Declaration and Signature (Official Form 110)   |

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 52 of 69

B2030 (Form 2030) (12/15)

In

#### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

|          |  | Northern District                 | or minors                          |                              |
|----------|--|-----------------------------------|------------------------------------|------------------------------|
| ·е       | Sterling Martin  |                                   | Case No.                           |                              |
|          | Debtor   |                                   |                                    | (If known)                   |
|          |  |                                   | Chapter                            | Chapter 13                   |
|          | DISCLOSURE OF  | COMPENSATION                      | OF ATTORNEY F                      | OR DEBTOR                    |
| con      | suant to 11 U.S.C. § 329(a) and F<br>npensation paid to me within one<br>dered or to be rendered on behalf | year before the filing of the pet | tition in bankruptcy, or agreed to | be paid to me, for services  |
| For      | legal services, I have agreed to ac  | ccept                             |                                    | \$4,000.00                   |
| Pric     | or to the filing of this statement I h   | nave received                     |                                    | \$350.00                     |
| Bala     | ance Due   |                                   |                                    | \$3,650.00                   |
| 2. The   | source of the compensation paid  | d to me was:                      |                                    |                              |
|          | <b>✓</b> Debtor  | Other (specify)                   |                                    |                              |
| 3. The   | source of the compensation paid  | d to me is:                       |                                    |                              |
|          | <b>✓</b> Debtor  | Other (specify)                   |                                    |                              |
| 4.       | I have not agreed to share the ab<br>members and associates of my la                                       |                                   | vith any other person unless the   | ey are                       |
|          | I have agreed to share the above<br>members or associates of my lav<br>the people sharing in the compe     | v firm. A copy of the agreement   |                                    |                              |
| 5. In re | eturn for the above-disclosed fee,<br>a. Analysis of the debtor's finan<br>bankruptcy;                     | -                                 | •                                  |                              |
|          | b. Preparation and filing of any   | petition, schedules, statements   | of affairs and plan which may b    | pe required;                 |
|          | c. Representation of the debtor  | at the meeting of creditors and   | confirmation hearing, and any a    | adjourned hearings thereof;  |
|          | d. Representation of the debtor  | in adversary proceedings and c    | other contested bankruptcy mat     | ters;                        |
| 6. By a  | agreement with the debtor(s), the  | above-disclosed fee does not i    | nclude the following services:     |                              |
|          |  |                                   |                                    |                              |
|          |  | CERTIFICAT                        |                                    |                              |
|          | ify that the foregoing is a complet in this bankruptcy proceedings.  | e statement of any agreement of   | or arrangement for payment to n    | ne for representation of the |
|          | 2/8/2018   |                                   | /s/ James Nowak                    |                              |
|          | Date   |                                   | Signature of Attorney              |                              |
|          |  |                                   | Semrad Law Firm                    |                              |
|          |  |                                   | Name of law firm                   |                              |

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

#### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN **CHAPTER 13 DEBTORS AND THEIR ATTORNEYS**

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and 5RM

#### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 54 of 69

6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

5RM

### Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 55 of 69

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to \$1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

SRM

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$362.00
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$52.00 for expenses, leaving a balance due of \$4,012.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Debtor(s)           | Attorney for Debtor(s) |
|---------------------|------------------------|
| /s/ Sterling Martin | /s/ James Nowak        |
| Signed:             |                        |
| Date: 2/8/2018      |                        |

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|         | \$1,167 | filing fee         |
|---------|---------|--------------------|
| +       | \$550   | administrative fee |
| \$1,717 |         | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$275 | total fee          |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$200 | filing fee         |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury - either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 62 of 69

#### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

| In re:          | Martin, Sterling  Debtor(s) | Case No   |                                     |
|-----------------|-----------------------------|---|-------------------------------------|
|                 |                             | Chapter.  | Chapter13                           |
|                 | VERIF                       | CICATION OF CREDITOR MAT                        | RIX                                 |
| Th<br>knowledge |                             | rify that the attached list of creditors is tru | ue and correct to the best of their |
| Date:           | 2/8/2018                    | /s/ Martin, Sterling                            | g                                   |
|                 |                             | Martin, Sterling<br>Signature of Deb            | tor                                 |

CHRYSLER Capital 91 WALL STREET POB 666 MADISON, CT, 06443

PEOPLES CREDIT, INC 115 E South St Ste 2 Plano, IL, 60545

Navient PO Box 9640 Wilkes Barre, PA, 18773

CONSUMERS COOP CRED UN 2750 WASHINGTON ST WAUKEGAN, IL, 60085

KEYNOTE CONS 1501 West Dundee Buffalo Grove, IL, 60089

VERIZON WIRELESS P.O. Box 660108 Dallas, TX, 75266

MIDLAND FUNDING PO Box 13105 Roanoke, VA, 24031

SYNCB/CAR CARE SYN CAR PO BOX 965036 ORLANDO, FL, 32896

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

ACCEPTANCE NOW 6288 Dawson Blvd Norcross, GA, 30093

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS, NV, 89193 CAINE & WEINER 21210 Erwin St Woodland Hls, CA, 91367

I C SYSTEM Po Box 64378 Saint Paul, MN, 55164

ONEMAIN PO BOX 1010 EVANSVILLE, IN, 47706

GATEWYFINSOL 221 North La Salle Street # 1000 Chicago, IL, 60601

IRS Irs Mail Stop 4100 P-3 Kansas City, MO, 64999

City of Aurora Po Box 457 Wheeling, IL, 60090

Illinois Tollway PO Box 5544 Chicago, IL, 60680

Chase Bank Po Box 659732 San Antonio, TX, 78265

Will County Circuit Clerk 14 W. Jefferson Street Joliet, IL, 60432

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 65 of 69

| Debtor 1 Sterling First Name  | Mart<br>Middle Name Last   | tin Cas  | se number (if known)   |   |
|---|--|--|--|---|
|   | estions for Reporting Purposes   | Name   |  |   |
| 16. What kind of debts do<br>you have?  | 16a. Are your debts primarily co "incurred by an individual pri No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily bu money for a business or inve No. Go to line 16c. Yes. Go to line 17.  16c. State the type of debts you of  | marily for a personal, far<br>siness debts? Business<br>estment or through the c   | mily, or household purpo<br>s debts are debts that you<br>operation of the business  | se." incurred to obtain or investment.  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No. I am not filing under Chapte  Yes. I am filing under Chapter 7. expenses are paid that fund No. Yes.   | Do you estimate that after   | any exempt property is exc<br>bute to unsecured creditors  | luded and administrative  |
| 18. How many creditors<br>do you estimate that<br>you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   | 50,0   | 001-50,000<br>001-100,000<br>e than 100,000   |
| 19. How much do you estimate your assets to be worth?   |  | \$1,000,001-\$10<br>\$10,000,001-\$5<br>\$50,000,001-\$1   | 00 million \$1,0<br>00 million \$10  | 0,000,001-\$1 billion<br>000,000,001-\$10 billion<br>,000,000,001-\$50 billion<br>e than \$50 billion         |
| 20. How much do you estimate your liabilities to be?  Part 7: Sign Below  | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million  | \$1,000,001-\$10<br>\$10,000,001-\$5<br>\$50,000,001-\$1<br>\$100,000,001-\$   | 00 million \$1,0<br>00 million \$10  | 0,000,001-\$1 billion<br>000,000,001-\$10 billion<br>,000,000,001-\$50 billion<br>re than \$50 billion        |
| For you   | I have examined this petition, and correct.  If I have chosen to file under Chap of title 11, United States Code. I u under Chapter 7.  If no attorney represents me and I out this document, I have obtained I request relief in accordance with I understand making a false staten connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 157 | ter 7, I am aware that I n<br>nderstand the relief avail<br>did not pay or agree to p<br>d and read the notice red<br>the chapter of title 11, L<br>nent, concealing propert<br>e can result in fines up to<br>19, and 3571. | nay proceed, if eligible, ur<br>ilable under each chapter,<br>pay someone who is not a<br>quired by 11 U.S.C. § 342<br>United States Code, speci | nder Chapter 7, 11,12, or 13, and I choose to proceed an attorney to help me fill (b). fied in this petition. |
|   | Executed on 2/8/2018<br>MM / DD / Y  | YYY  | Executed on  | 1/DD/YYYY   |

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 66 of 69

| Fill in this information to identify your case: |               |             |                      |  |  |
|---|---------------|-------------|----------------------|--|--|
| Debtor 1  | or 1 Sterling |             | Martin               |  |  |
|   | First Name    | Middle Name | Last Name            |  |  |
| Debtor 2  |               |             |                      |  |  |
| (Spouse, if filing)                             | First Name    | Middle Name | Last Name            |  |  |
| United States Bankruptcy Court for the:         |               | Northern    | District of Illinois |  |  |
|   |               |             | (State)              |  |  |
| Case number<br>(If known)                       |               |             |                      |  |  |

#### Official Form 106Dec

Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | 1: Sign Below  |   |
|-----|--|---|
|     | Did you pay or agree to pay someone who is NOT an attorney to                                    | help you fill out bankruptcy forms?   |
|     | <b>✓</b> No  |   |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|     |  |   |
|     |  |   |
|     | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and   |
| ×   | /s/ Sterling Martin  | *   |
|     | Signature of Debtor 1  | Signature of Debtor 2   |
|     | Date 2/8/2018 MM/DD/YYYY   | Date MM/DD/YYYY   |

Official Form 106Dec

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 67 of 69

| Jeblor I | Sterling   |  | Martin                        | Case number (if known)   |
|----------|--|--|-------------------------------|--|
|          | First Name   | Middle Name                            | Last Name                     |  |
|          | thin 2 years before you<br>editors, or other parties |  | you give a financial staten   | nent to anyone about your business? Include all financial institutions |
| <b>✓</b> | No<br>Yes. Fill in the details                       | below.                                 |                               |  |
| Managa   |  |  | Date issued                   |  |
|          | Name   | ************************************** | MM/DD/YYYY                    |  |
|          | Number Street  |  | -                             |  |
|          | City   | state Zip Code                         |                               |  |
|          | _  | ,                                      |                               |  |
| Part 12: | Sign Below   |  |                               |  |
| a ba     | ★ /s/ Ster   | ling Martin                            | 0, or imprisonment for up t   | co 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.          |
|          | Signature of   | of Debtor 1                            |                               | Signature of Debtor 2  |
|          | Date 2/8/  | /2018                                  |                               | Date   |
|          | vou attach additional r                              | pages to Your Statement                | of Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)?                     |
| Did      | , ca attaon adam.                                    |  |                               |  |
|          | No   |  |                               |  |
|          |  |  |                               |  |
| <b>✓</b> | No<br>Yes  | y someone who is not an                | attorney to help you fill ou  | nt bankruptcy forms?   |
| <b>✓</b> | No<br>Yes  | y someone who is not an                | attorney to help you fill ou  | nt bankruptcy forms?   |

Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 68 of 69

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Martin, Sterling                       | Case No                                  |                                     |
|-----------------|--|--|-------------------------------------|
|                 | Debtor(s)                              |  |                                     |
|                 |  | Chapter.                                 | Chapter13                           |
|                 | VERIFICA                               | TION OF CREDITOR MAT                     | RIX                                 |
| Th<br>knowledge | e above named Debtors hereby verify th | at the attached list of creditors is tro | ue and correct to the best of their |
| Date:           | 2/8/2018                               | /s/ Martin, Sterlin                      | g 5/-                               |
|                 | 2/0/2010                               | Martin, Sterling Signature of Deb        |                                     |

# Case 18-03497 Doc 1 Filed 02/08/18 Entered 02/08/18 11:08:48 Desc Main Document Page 69 of 69

| Debto   | r 1 Sterling   |  | Martin                      | Case number (if known)                                |             |  |
|---|--|--|-----------------------------|---|-------------|--|
| Dobto   | First Name   | Middle Name  | Last Name                   |   |             |  |
| 16.   | alculate the median family income that applies to you. Follow these steps:   |  |                             |   |             |  |
|   | 16a. Fill in the state in whi  | ch you live.   | Illinois                    |   |             |  |
|   | 16b. Fill in the number of people in your household.   |  | 2                           |   |             |  |
|   | 16c. Fill in the median family income for your state and size of   |  |                             |   | \$67,254.00 |  |
|   | household  |  | To find                     | a list of applicable median income amounts, go online |             |  |
| 17  | using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  How do the lines compare?  |  |                             |   |             |  |
| 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 1 |  |  |                             |   |             |  |
|   | 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 11 U.S.C. § 1325(b)(3)</i> . <b>Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2).</b> On line 39 of that form, copy your current monthly income from line 14 above. |  |                             |   |             |  |
| Part  | Calculate Your Co  | mmitment Period Under  | 11 U.S.C. §1325(b)          | (4)   |             |  |
|   | Copy your total average monthly income from line 11.   |  |                             |   | \$2,613.56  |  |
| 19.   | commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  |  |                             |   |             |  |
|   | 19a. If the marital adjustm  | nent does not apply, fill in 0 on  | line 19a.                   |   | -\$0.00     |  |
|   | 19b. Subtract line 19a f   | ubtract line 19a from line 18.   |                             |   | \$2,613.56  |  |
| 20.   | Calculate your current monthly income for the year. Follow these steps:  |  |                             |   |             |  |
|   | 20a. Copy line 19b.  |  |                             |   | \$2,613.56  |  |
|   | Multiply by 12 (the r  | number of months in a year).   |                             |   | x 12        |  |
|   | 20b. The result is your cu   | rrent monthly income for the y   | ear for this part of the fo | rm.   | \$31,362.72 |  |
|   | 20c. Copy the median family income for your state and size of household from line 16c.   |  |                             |   | \$67,254.00 |  |
| 21.   | How do the lines compare?  |  |                             |   |             |  |
|   | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.   |  |                             |   |             |  |
|   | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4.   |  |                             |   |             |  |
| Part 4: Sign Below  |  |  |                             |   |             |  |
| By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  *  /s/ Sterling Martin   **  **  **  **  **  **  **  **  **                                 |  |  |                             |   |             |  |
|   | Signature of Del   | 10001  |                             | Signature of Debtor 2                                 |             |  |
|   | Date 2/8/2018<br>MM/DD/  |  |                             | Date MM/DD/YYYY                                       |             |  |
|   | If you checked 17a,<br>If you checked 17b,<br>above.   | If you checked 17a, do NOT fill out or file Form 122C-2.  If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. |                             |   |             |  |